City of Tampa
Jane Castor, Mayor

Purchasing Department
Gregory K. Spearman, CPPO, Director
306 E. Jackson Street, 2E
Tampa, Florida 33602

Office (813) 274-8351
Fax: (813) 274-8355

March 31, 2021

INVITATION TO BID

Pursuant to Chapter 69-1119, Special Acts, Laws of Florida, sealed Bids for the furnishing of: **BID NO. 31041421, PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, AND INSTALLATION, REPAIRS AND REPLACEMENT** will be received by the Director of Purchasing, City of Tampa, until **APRIL 14, 3:00 PM** then to be opened and read. The Bid Opening shall be thereafter and open to the Public VIA GoToMeeting. Below are the instructions to participate in this online meeting:

Please join my meeting from your computer, tablet or smartphone.
https://global.gotomeeting.com/join/225298773

You can also dial in using your phone.
United States: +1 (669) 224-3412

Access Code: 225-298-773

In accordance with the Americans with Disabilities Act ("ADA") and Section 286.26, Florida Statutes, persons with disabilities needing a reasonable accommodation to participate in this public hearing or meeting should contact the City of Tampa's ADA Coordinator at least 48 hours prior to the proceeding. The ADA Coordinator may be contacted by phone at 813-274-3964, email at TampaADA@tampagov.net, or by submitting an ADA - Accommodations Request online form available at http://www.tampagov.net/ADARequest. Please note that the City of Tampa may not be able to accommodate any request received less than 48 hours before the scheduled hearing or meeting.

Attached are important instructions and specifications regarding responses to this invitation. **Failure to follow these instructions may result in your bid being disqualified.**

Questions regarding this bid should be referred to **CELESTE GIBBONS-PEOPLES, CPPB, CERTIFIED PROCUREMENT ANALYST.** Questions shall be submitted by email to **celeste.gibbons-peoples@tampagov.net**. Questions pertaining to the Bid document will be accepted up to five days prior to the scheduled opening date and time referenced above.

Submission of bid responses by mail or express mail must be in a sealed envelope with the Bidder's name and return address indicated. **Type or print the Bid Number and Bid Title on the carrier envelope.** Address the bid envelope as follows:

Purchasing Department (This address is appropriate for mailing and express mail)
Tampa Municipal Office Building, 2nd Floor
306 E. Jackson Street
Tampa, Florida 33602

The Tampa Municipal Office Building is a controlled access building and all visitors are required to obtain a Visitor's Pass prior to visiting the Purchasing Department.

Bids shall be accepted no later than the time and date specified on the **INVITATION TO BID**. The Bid Opening shall be thereafter and open to the Public. All bids received after the due date and time shall be rejected. Offers by telegram, telephone or transmitted by facsimile (FAX) machine are not acceptable. No bid may be withdrawn or modified after the time fixed for the opening of bids.

Submittals may be sent electronically via the Internet as an attachment to an email addressed to BidControl@Tampagov.net . The subject line of the email should include the Bid/RFP number and title. **To ensure that an electronic submittal is received by the opening date and time listed above it is recommended that the Bidder/Proposer submit their**

documents no less than 30 minutes prior to the deadline. VERIFICATION OF THE CITY'S RECEIPT OF A BID SUBMITTED ELECTRONICALLY IS THE BIDDER/PROPOSER'S RESPONSIBILITY. To verify receipt of submittals sent electronically, Bidders/Proposers may contact the Purchasing Department at 813-274-8351. Any submittal received after the deadline will not be considered.

STATEMENT OF NO BID

WE WANT YOUR FEEDBACK BECAUSE IT MATTERS TO US

The Purchasing Department's mission is to provide the best specifications in our Bid and Request for Proposal packages to receive maximum participation from the industry/market. Please take a few minutes to briefly explain to us why you will not be responding to the City's Bid or Request for Proposal.

INSTRUCTIONS TO BIDDER

EXECUTED, SEALED BID: For hardcopy submittals, Bidder should submit the original and two copies of the bid response form, the Bidder's Affidavit form and any other requested forms or documents furnished by the City in the bid package. Documents must be executed by an original signature of an authorized representative of the Bidder.

City of Tampa bids are issued electronically via DemandStar's eProcurement bid distribution system. Obtaining bids through Demandstar will ensure that vendor will have the following capabilities: receipt of bids electronically, track the status of bid award activity, receive addenda, be certified as a minority vendor to meet the City of Tampa's minority certification requirements, receive the results of bid awards and view plans and blueprints online electronically. Vendors who obtain specifications and plans from sources other than Demandstar are cautioned that the bid packages may be incomplete. The City will not accept incomplete bids. Contact Demandstar at 800-711-1712 or visit www.demandstar.com/supplier for more information.

The City is not responsible for errors and omissions occurring in the transmission or downloading of any quote documents, plans, or specifications from this website. In the event of any discrepancy between information on this website and the hard copy quote documents, the terms and conditions of the hardcopy document will prevail. DemandStar has no affiliation with the City of Tampa other than as a service that facilitates communication between the City and its vendors. DemandStar is an independent entity and is not an agent or representative of the City. Communications to DemandStar does not constitute communications to the City. Contact DemandStar at 800-711-1712 or visit www.DemandStar.com/supplier for more information.

Bidders discovering any ambiguity, conflict, discrepancy, omission or other error in this BID, shall immediately notify the City of such error in writing and request modification or clarification of the BID. Modifications will be made by issuing an addendum and will be given by written notice to all prospective Bidders who received an original BID from DemandStar (Those who are on the Plan Holders List). Addenda will be posted and disseminated by DemandStar at least five days prior to this BID opening date. The Bidder is responsible for clarifying any ambiguity, conflict, discrepancy, omission or other error in the BID prior to submitting the bid or it shall be deemed waived.

Bid tabulations (results) will be posted to DemandStar and made available to bidders after the scheduled public opening of the sealed bids.

The bid documents contain a General Conditions Section and may, in most cases, contain a Technical Specification Section. General Conditions contain general requirements and Technical Specifications detail the scope of the goods and/or services requested. The Technical Specifications shall always govern whenever there appears to be a conflict.

The Bidder shall comply with the applicable requirements of Federal and state laws, all Codes and Ordinances of the City of Tampa as amended from time to time and any applicable professional regulations.

The Bidder is expected to carefully examine the entire bid package, including but not limited to the all provisions, terms, and conditions. **Failure to do so will be at the Bidder's risk.**

GPC LISTING

City of Plant City
Buddy Storey
Purchasing Manager
Drawer C
Plant City, FL 33563
813-659-4270 - Telephone
813-659-4216 - Fax
wstorey@plantcitygov.com

City of Temple Terrace
Judy Crutcher, Assistant Purchasing Agt.
P.O. Box 16930
Temple Terrace, FL 33687
813-506-6420 – Telephone
813-989-7185 – Fax
jcrutcher@templeterrace.com

Clerk of Circuit Court
601 E. Kennedy Blvd.-13th Floor
P.O. Box 1110
Tampa, FL 33601
Phone: (813) 276-8100 Ext.7721
FAX: (813) 272-5521
www.hillsclerk.com

Tampa-Hillsborough County Expressway Authority
1104 East Twiggs St. Suite #300
Tampa, Florida 33602
813-272-6740 – Telephone
813-276-2492 – Fax
Man.Le@tampa-xway.com

Hillsborough Area Regional Transit Authority
Melissa Smiley
4305 E. 21st Street
Tampa, FL 33605
813-623-5835 – Telephone
813-664-1119 – Fax
smileym@gohart.org

Hillsborough Co. Aviation Authority
P. O. Box 22287
Tampa International Airport
Tampa, FL 33622-2287
Phone: (813) 870-8730
FAX: (813) 875-6670
www.tampaairport.com

Hillsborough County School Board
P. O. Box 3408
Tampa, FL 33601-3408
Phone: (813) 272-4329
FAX: (813) 272-4007
www.sdhc.k12.fl.us

Hillsborough Community College
Vonda Melchior, Director of Purchasing
39 Columbia Drive
Tampa, FL 33606
813-253-7060 – Telephone
813-253-7561 – Fax
vmelchoir@hcc.fl.edu

Hillsborough County Board of County Commissioners
Scott Stromer, Director
601 E. Kennedy Blvd., 26th Floor
Tampa, FL 33601
Phone: (813) 272-5790
FAX: (813) 272-6290
procurementservices@hillsboroughcounty.org

Hillsborough Co. Sheriff's Office
Christina R. Porter, Chief Financial Officer
P.O. Box 3371
Tampa, FL 33601
813-247-8032 – Telephone
813-242-1825 – Fax
CRPorter@hcso.tampa.fl.us

State Attorney's Office
Mark Ober, State Attorney
800 E. Kennedy Blvd., 5th Floor
Tampa, FL 33602
813-272-5400 – Telephone
813-272-7014 – Fax
Ober_M@SAO13th.com

Tampa Port Authority
Donna Casey, Procurement Analyst
P.O. Box 2192
Tampa, FL 33601
813-905-5164 – Telephone
813-905-5109 – Fax
dwebb@tampaport.com

Supervisor of Elections
601 E. Kennedy Blvd., 16th Floor
Tampa, FL 33602
Phone: (813) 276-8274
FAX: (813) 272-7043
www.votehillsborough.org

City of Tampa Housing Auth.
Jerome Ryans, President/CEO
1514 Union Street
Tampa, FL 33607
813-253-0551 – Telephone
813-4522 – Fax
irenew@thafl.com

Tampa Sports Authority
Joe Haugabrook, Director of Purchasing
4201 N. Dale Mabry Highway
Tampa, FL 33607
813-673-4300 – Telephone
813-673-4312 – Fax
jhaugabrook@tampasportsauthority.com

Tax Collector
601 E. Kennedy Blvd., 14th Floor
Tampa, FL 33602
Phone: (813) 307-6222
FAX: (813) 307-6521
www.hillstax.org

The Children's Board of Hills. County
1002 E. Palm Avenue
Tampa, FL 33605
Phone: (813) 229-2884
FAX: (813) 228-8122
www.childrensboard.org

University of South Florida
George Cotter, Director
Purchasing Services
4202 E Fowler Ave SVC-1072
Tampa, FL 33620
813-971-3340 – Telephone
gcotter@admin.usf.edu

Property Appraiser
601 E. Kennedy Blvd., 16th Floor
Tampa, FL 33602
Phone: (813) 272-6100
FAX: (813) 272-5519
www.hcpafl.org

Tampa Palms Community Dev. Dist.
16311 Tampa Palms Blvd W
Tampa, FL 33647
Phone: (813) 977-3933
Fax: (813) 977-6571
www.tpoa.net

GENERAL CONDITIONS FOR
SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT

1. SCOPE AND CLASSIFICATION

1.1 SCOPE. This specification describes Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement for use by the City of Tampa Parks and Recreation Department.

1.2 CLASSIFICATION. The classification shall be as contained in the technical portion of this specification listed herein below.

2. QUALITY ASSURANCE PROVISIONS

2.1 TEST AND INSPECTION. It shall be the Awardee's responsibility to perform all tests and inspections required by this specification, unless otherwise stated in the award. The City of Tampa reserves the right to perform any of the tests and inspection requirements where said tests and inspections are needed to further determine compliance with this specification.

2.2 QUALITY AND QUALITY CONTROL. A system of test and inspection shall be used to ensure receipt of the quality and quantity of material(s)/service(s) purchased. Material(s)/service(s) will be promptly inspected and any discrepancies from the purchase order and/or the supplier's invoice shall be reported immediately to the Director of Purchasing.

3. AWARDEE LIABILITY

3.1 GUARANTEE. The material(s) supplied shall be guaranteed to be free from defect of composition, conception and workmanship for the minimum manufacturer’s warranty period from the date of acceptance by the City. Any parts or portions found not in accordance with this specification will be rejected by the City and returned to the Awardee at the Awardee’s expense for immediate replacement.

4. CONDITIONS

4.1 AUTHORIZATION. All orders shall be placed via City of Tampa Purchase Orders, or as releases against a City of Tampa “Open” Purchase Order. **OFFICIAL AWARD WILL BE MADE BY CITY OF TAMPA PURCHASE ORDER ONLY.** As relating to the Government Purchasing Council of Hillsborough County, any member may place orders as dictated by its individual entity’s preference.

4.2 FURNISHING BID ITEMS. Award items are to be furnished on an "as needed, when needed basis" during the life of the award.

4.3 BACKORDERS. Any backordered materials shall be made available to the City within 15 working days of the time of backorder (original date of receipt). If the backorder cannot be filled within the time frame of this section, then the City of Tampa is to be notified, in writing, thus permitting the City to obtain the required materials and/or exercise its options.

4.4 QUALITY. The materials to be furnished shall be currently in production and shall be of the manufacturer’s standard or better quality.

4.5 BRAND INDICATION. Where same is applicable, all Bidders shall clearly indicate manufacturer/trade name and identifying number in the space provided within the attached proposal of this specification and invitation for bid.

4.7 PENALTIES. The City of Tampa reserves the right to increase or decrease quantities shown without penalty.

4.8 ADDITION/DELETION. The City of Tampa reserves the right to add to or delete any item from this bid or resulting award when deemed to be in the best interest of the City of Tampa.

4.9 PACKAGING. Only materials that are packaged in the original factory fresh packaging shall be accepted. No materials that have been re-packaged or that are in adulterated or damaged packages shall be accepted at the receiving location, nor shall after-market materials be accepted at the receiving location. Any attempt by the Awardee to furnish the City of Tampa with other than first quality materials shall constitute default as outlined in this specification.

4.10 SUBSTITUTION. The Awardee shall not substitute items for like items without the approval of the City. Any violation of such procedures may result in a possible award cancellation. All approved substitutes shall be annotated as such on the Awardee's shipping document(s).

4.11 BID PRICES. Bid prices shall be firm and shall not be amended after the date and time of the bid opening. Any attempt by the Awardee to amend said bid prices shall constitute default as outlined in this specification.

Prices quoted in the Proposal and Bid Response form shall include all shipping costs, shipped F.O.B. Tampa, Florida or to the facility location specified by the requestor or the purchase order.

All taxes of any kind and character payable on account of the work done and materials furnished under the award shall be paid by the Awardee and shall be deemed to have been included in the bid. The Laws of the State of Florida provide that sales tax and use taxes are payable by the Awardee upon the tangible personal property incorporated in the work and such taxes shall be paid by the Awardee and shall be deemed to have been included in the bid. The City is exempt from all state and federal sales, use, transportation and excise taxes.

Award prices include all royalties and costs arising from patents, trademarks, and copyrights in any way involved in the work. Whenever the Awardee is required or desires to use any design, device, material or process covered by letters of patent or copyright, the Awardee shall indemnify, defend and save harmless the City, its officers, agents and employees from any and all claims for infringement by reason of the use of any such patented design, tool, material, equipment, or process, to be performed under the contract, and shall indemnify the said City, its officers, agents, and employees for any costs, expenses and damages which may be incurred by reason of any infringement at any time during the prosecution or after the completion of the work. The duty to defend under this paragraph is independent and separate from the duty to indemnify, and the duty to defend exists regardless of any ultimate liability of the Awardee, the City and any indemnified party. This provision shall survive the termination of this award and shall continue in full force and effect so long as the possibility of any liability, claim or loss exists, unless otherwise prohibited by law.

4.12 BID EVALUATION. The evaluation of bids and the determination as to the quality, durability and warranty of material(s)/service(s) offered shall be the responsibility of the City of Tampa and will be based on information furnished by the Bidder.

4.13 BASIS OF AWARD. As deemed in the best interest, the City of Tampa reserves the right to make award(s) by group of items, all or none, or a combination thereof with one or more supplier(s) or provider(s) The City may reject any and all bids or waive any irregularity or technicality in bids received.

The pricing structure shall be derived from the most current catalog(s) or price sheet(s) at the time of the bid opening minus a percentage discount from the Suggested List column of the published price. All percentage discounts quoted shall be firm and final during the award period.

Award Criteria/Responsibility. The award will be made to the lowest responsive, responsible Bidder. To determine the responsibility of the monetary Bidder, the City may request and review documentation relative to the ability of the Bidder to satisfactorily perform the work specified in a first class manner as well as documentation of its experience; the financial condition of the Bidder from a current financial report and the Bidder's credit rating; whether the Bidder has ever been declared in default of an award; the Bidder's insurability, eligibility for bonding; and any/all pertinent information deemed necessary to determine said responsibility.

Prior to award resulting from this solicitation, the proposed Awardee(s) shall be registered to transact business in the State of Florida and shall furnish the City with proof of registration with ten days of the notice to do so by the City. Failure to promptly submit this evidence of qualification to transact business in the State of Florida may be a basis for rejection of the bid.

Any Bidder who is owing to the City of Tampa upon any debt, contract, or other obligation to the City, or who is a defaulter as a surety or otherwise, will not be eligible for consideration for contract award regarding this solicitation.

An award will be made, if at all, within 120 days after opening of the bids.

4.14 COMMUNICATION POLICY. During any solicitation period, including any protest and/or appeal, no contact with City officials or employees, other than with the individuals specifically identified in the solicitation, the Director of Purchasing or the Legal Department is permitted from any proposer/bidder. Such communication shall result in an automatic disqualification for selection in the pending solicitation and any subsequent City solicitations for a period of six (6) months, no matter the outcome of the solicitation or any protest and/or appeal.

4.15 AWARD PERIOD AND RENEWAL. The award period shall be for a three-year period from the effective date of the award, and may, by mutual written agreement, be renewed at the same terms and conditions for an additional one-year period.

4.15.1 SUPPLEMENTAL UNILATERAL RENEWAL PERIODS. The City, through its Director of Purchasing, has the option and reserves the right to unilaterally extend the original contract term or any renewal term for up to three (3) additional thirty (30) day periods, at the same terms and conditions. Notice of the City's intent to renew shall be provided by the City in writing to the Awardee prior to the expiration of the contract, or the renewal period if the contract has been previously renewed.

4.16 NON-APPROPRIATION OF FUNDS. In the event no funds or insufficient funds are appropriated for expenditures under this award, the City will notify the Awardee in writing of such occurrence and the award shall terminate without penalty or expense to the City on the last day of the fiscal year in which sufficient funds have been appropriated.

4.17 PRICE ESCALATION/DE-ESCALATION. The City of Tampa will allow a price escalation provision within this award.

The original bid prices shall be firm and may be revised upon the receipt of updated catalog and price lists. The Awardee(s) shall provide to the City of Tampa with the published manufacturers price lists anytime the manufacturers revise their dated price pages. The City of Tampa will have 30 days upon receipt of the dated price pages to review and make necessary changes.

In no event shall the percentage of mark-up change from the percentage mark-up indicated on the Bid Response Pages.

4.18 PERFORMANCE. The Awardee may be required to furnish evidence in writing that he or she maintains a permanent place of business and has adequate equipment, finances, personnel, and inventory to furnish the items offered satisfactorily and expeditiously and can provide necessary services.

4.19 PROOF OF DISTRIBUTORSHIP. When requested, it shall be the responsibility of the Bidder(s) to furnish with their bid(s) a letter stating that said Bidder is a factory authorized distributor for the Greater Tampa area for the items for which said Bidder has submitted their bid.

4.20 INSPECTION. The City of Tampa reserves the right to inspect the Bidder's place of business and equipment prior to awarding any award to determine the responsibility of said Bidder to perform or provide the requirements of the bid request.

4.21 AWARD CHANGES. No changes, over the award period, shall be permitted unless prior written approval is given by the Director of Purchasing and, where applicable, confirmed by resolution of the City Council of the City of Tampa.

4.22 ASSIGNMENT. To the extent permitted by applicable law, this contract, and all rights or obligations hereunder, is not assignable, in whole or in part, by operation of law, acquisition of assets, merger, consolidation, dissolution or otherwise without the advance written approval of the other party to this contract. Any attempted assignment of this contract by a party without the advance written approval of the other party shall be invalid and unenforceable against the other party. Any approved assignment of this contract by the Awardee will not relieve the Contractor from the performance of its duties, covenants, agreements, obligations, and undertakings under this contract, unless the assignment expressly provides otherwise. No assignment by the Awardee shall be effective unless the assignee confirms in writing to the City that the assignee accepts and shall comply with all of the duties, responsibilities, and

obligations of the Awardee. Notwithstanding the foregoing, the City may assign its rights under this contract (without the Awardee's consent or approval) to a governmental successor of the City. An assignment by the City of its rights under this contract to a governmental successor of the City will relieve the City from the performance of its duties, covenants, agreements, and obligations under this contract after the effective date of the assignment. However, the City shall continue to be liable for the obligations it incurred under this contract prior to the effective date of the assignment. Action by the City in awarding a bid/proposal to a bidder/proposer, which has disclosed its intent to assign or subcontract in its response to the ITB/RFP, without exception shall constitute approval for purposes of this award.

4.23 DEFAULT/RE-AWARD. Any award resulting from this specification may be cancelled by the Director of Purchasing in whole or in part by written notice of default to the Awardee upon non-performance or violation of award terms, including the failure of the Awardee to deliver materials or services within the time stipulated in this specification, unless extended in writing by the Director of Purchasing. In the event an award is cancelled because of the default of the Awardee, the Director of Purchasing may: (i) purchase the materials or services specified in this specification on the open market; or (ii) make an award to the next lowest bidder and establish the period of such award, provided such period is no longer than the award period set forth in this specification.

4.24 CANCELLATION. When deemed to be in the best interest of the City of Tampa, any awards or contracts resulting from this specification may be cancelled by the following means:

4.24.1 10-day written notice with cause; or

4.24.2 30-day written notice without cause.

4.25 REJECTION. The City of Tampa reserves the right to cancel, reject any and/or all bids, or to waive any irregularities and accept that bid which is the lowest and best.

4.26 GOVERNMENT PURCHASING COUNCIL. Hillsborough County Government Purchasing Council ("GPC") members, may, at their discretion or option, utilize this bid as they require. Estimated quantities for Hillsborough County GPC members have not been included in the Bid Response form. Purchases by these entities may increase the value of the award. A list of the members of the GPC is contained within this bid document.

Any Hillsborough County GPC member which avails itself of this contract will establish its own contract, place its own orders, issue its own purchase orders and issue its own exemption certificates as required by the Bidder. It is understood and agreed that the City of Tampa is not a legally bound party to any contractual agreement made between any other governmental entity and the Bidder as a result of this Bid.

4.27 USE OF CONTRACT BY OTHER GOVERNMENTAL AGENCIES. Unless otherwise stipulated by the Bidder in its proposal, the Bidder agrees to make available to all government agencies, departments, and municipalities the proposed prices submitted in accordance with the terms and conditions of this Solicitation Document, should any governmental entity desire to buy under the Contract resulting from this Solicitation Document.

Any other governmental agency, department, or municipality which avails itself of this contract will establish its own contract, place its own orders, issue its own purchase orders and issue its own exemption certificates as required by the Bidder. It is understood and agreed that the City of Tampa is not a legally bound party to any contractual agreement made between any other governmental entity and the Bidder as a result of this Bid.

4.28 USE OF STATE CONTRACT, GPC, OR COOPERATIVE PURCHASING BIDS. The City of Tampa reserves the right to utilize applicable State of Florida Contracts, GPC Bids, or those contracts of any other federal, state, or local governmental entity under the terms of a bid submitted to such entity, provided that such contract is procured in compliance with the procuring entity's law, bylaws, regulations, or ordinances regarding competitive solicitation, which must provide for full and open competition for any items covered by this specification when the use of same is in the best interest of the City of Tampa.

4.29 CONVICTED VENDOR LIST (PUBLIC ENTITY CRIME). A person or affiliate who has been placed on the convicted vendor list following a conviction for a public entity crime may not submit a bid on an award/contract to provide any goods or services to a public entity, may not submit a bid on an award/ contract with a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to a public entity, may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a contract with any public entity, and may not transact business with any public entity in excess of the threshold amount provided in Section 287.017

for Category Two for a period of 36 months from the date of being placed on the convicted vendor list. [See Florida State Statute 287.133 (2)(a)]

4.30 FLORIDA PUBLIC RECORDS LAW. In accordance with Chapter 119 of the Florida Statutes, and, except as may be provided by Chapter 119 of the Florida Statutes and other applicable State and Federal Laws, all Bidders should be aware that the Bid and the responses thereto are in the public domain and are available for public inspection and copying. If the Bidder is asserting that certain information in its Bid is confidential and/or proprietary and/or exempt from public disclosure, then the Bidder is required to do the following: (1) identify, with specificity, the information which the Bidder asserts is confidential and/or proprietary and/or exempt from public disclosure, (2) place such information (including any applicable electronic media on which such information is contained) in a sealed envelope that is separate from the Bidder's other Bid documents, (3) clearly label the envelope that contains the confidential, proprietary and/or exempt information as follows: "EXEMPT FROM PUBLIC DISCLOSURE" with Bidder's name and the Bid number marked on the outside, and (4) specifically cite the applicable Florida Statute(s) that exempts such information from public disclosure - such citation must be placed on the sealed envelope and also on a separate document contained within the sealed envelope along with any relevant explanations. The envelope that contains the Bidder's confidential/proprietary/exempt information must be submitted with the Bidder's other Bid documents. Bidder is advised that failure to follow the aforementioned instructions may result in Bidder's alleged confidential/proprietary/exempt information being disclosed to the public. All submittals received in response to this Bid will become the property of the City of Tampa and will not be returned. In the event of an award, all documentation produced as part of the contract will become the exclusive property of the City.*

Be aware that the designation of an item as exempt from public disclosure by a Bidder may be challenged in court by any person or entity. By designation of material in your Bid submittal as exempt from public disclosure, Bidder agrees to defend the City of Tampa (and its employees, agents and elected and appointed officials) against all claims and actions (whether or not a lawsuit is commenced) related to Bidder's designation of material as exempt from public disclosure and to hold harmless the City of Tampa (and its employees, agents and elected and appointed officials) for any award to a plaintiff for damages, costs and attorneys' fees, and for costs and attorneys' fees incurred by the City by reason of any claim or action related to your designation of material as exempt from public disclosure.

***Note: The City will not accept Bid submittals when the entire submittal is labeled as exempt from public disclosure. Bidder's References and Cost or Price information will be deemed a public record, and if a claim of confidentiality/proprietary information is made, the City may deem the Bid submittal as "non-responsive".**

4.30.1 In accordance with section 119.071(1)(b)2, Florida Statutes, sealed bids, proposals, or replies received by the City of Tampa pursuant to a competitive solicitation are exempt from section 119.07(1), Florida Statutes and section 24(a), Art. I of the State Constitution until such time as the City of Tampa provides notice of an intended decision or until 30 days after opening the bids, proposals, or final replies, whichever is earlier.

4.30.2 In accordance with section 119.071(1)(b)3, Florida Statutes, if the City of Tampa rejects all bids, proposals, or replies submitted in response to a competitive solicitation and the City of Tampa concurrently provides notice of its intent to reissue the competitive solicitation, the rejected bids, proposals, or replies remain exempt from section 119.07(1), Florida Statutes and section 24(a), Art. I of the State Constitution until such time as the City of Tampa provides notice of an intended decision concerning the reissued competitive solicitation or until the City of Tampa withdraws the reissued competitive solicitation. A bid, proposal, or reply is not exempt for longer than 12 months after the initial City of Tampa notice rejecting all bids, proposals, or replies.

4.30.3 The City of Tampa is a public agency subject to Chapter 119, Florida Statutes. In accordance with Florida Statutes, 119.0701, Awardee agrees to comply with Florida's Public Records Law, including the following:

1. Awardee shall keep and maintain public records required by the City to perform the services;

2. Upon request from the City, Awardee shall provide the City with copies of the requested records, having redacted records in total or in part that are exempt from disclosure by law or allow the records to be inspected or copied within a reasonable time (with provision of a copy of such records to the City) on the same terms and conditions that the City would provide the records and at a cost that does not exceed that provided in Chapter 119, Florida Statutes, or as otherwise provided by law;

3. Ensure that public records, in part or in total that are exempt or that are confidential and exempt from public record requirements are not disclosed except as authorized by law for the

duration of the contract term and following completion (or early termination) of the contract if the Contractor does not transfer the records to the City;

4. Upon completion (or earlier termination) of the award, Awardee shall within 30 days after such event either transfer to the City, at no cost, all public records in possession of the Awardee or keep and maintain the public records in compliance with Chapter 119, Florida Statutes. If Awardee transfers all public records to the City upon completion (or earlier termination) of the award, Awardee shall destroy any duplicate records that are exempt or confidential and exempt from public records disclosure requirements. If Awardee keeps and maintains public records upon completion (or earlier termination) of the award, Awardee shall meet all applicable requirements for retaining public records. All records stored electronically must be provided to the City in a format that is compatible with the information technology systems of the agency.

5. The failure of Awardee to comply with Chapter 119, Florida Statutes, and/or the provisions set forth above shall be grounds for immediate unilateral termination of the contract by the City; the City shall also have the option to withhold compensation due Awardee until records are received as provided herein.

6. **IF THE AWARDEE HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES TO THE AWARDEE'S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS AWARD, CONTACT THE CUSTODIAN OF PUBLIC RECORDS AT 813/274-8351, COTPurchasingPRR@tampagov.net, AND MAILING ADDRESS OF PURCHASING DEPARTMENT, TAMPA MUNICIPAL OFFICE BUILDING, 2ND FLOOR, 306 E. JACKSON STREET, TAMPA, FL 33602.**

4.31 PROCUREMENT PROTEST PROCEDURES. A protest must be filed with the Director of the soliciting Department within five (5) business days of posting the City's intent to award and may be filed by an actual bidder or proposer, who is allegedly aggrieved in connection with the issuance of a bid solicitation, proposal solicitation or pending award of any contract in any competitive process utilized by the City of Tampa for procurements of supplies, materials or services and construction of public improvements and has standing to protest under Florida Law. Any protest must be filed in accordance with the City of Tampa Code, Chapter 2, Article V, Division 3, Purchases and Contracts, Section 2-282, Procurement Protest Procedures. Protests not complying with the provisions of this Section shall not be reviewed.

All dates and times specified in the Protest Procedures in Section 2-282 are calculated as city business days. A City business day shall mean 8:00 am to 5:00 pm Monday through Friday, with the exception of city holidays. In all instances any document required to be transmitted by a certain date must be received in the required office by 4:30 pm. An envelope which is postmarked by the required date is not sufficient. Transmittal by fax, email or other electronic means may be accepted. However, it shall be the responsibility of the party transmitting the document(s) to ensure that the document(s) were received, and the transmitting party shall bear any risk of interruption or failure in the electronic transmission.

4.32 LAWS, CODES AND ORDINANCES. The Awardee/Bidder shall comply with all Federal, State, County and City laws, rules and regulations as applicable to this bid.

4.33 AUDIT RIGHTS. Awardee agrees that the City or its authorized representative shall have access to, and the right to audit, examine, or reproduce, the financial books and records of Awardee related to Awardee's performance under the contract. Awardee shall retain all such records for a minimum period of six (6) years from the date of termination of the contract, including any renewal or extension hereof, or for such longer period of time as required by federal or state law, and shall be extended until the completion of any audit in progress. Awardee must keep all financial records in a manner consistent with generally accepted accounting principles. Awardee must provide access during normal business hours to the requested records no later than ten (10) calendar days after the written request by the City

or its authorized representative. If any audit reveals any material deviation from the contract requirements, any misrepresentations or any overcharges to the City, the City will be entitled to recover damages, as well as the cost of the audit. Any adjustments or payments which must be made as a result of any such audit or inspection of the Awardee's invoices or records must be made within a reasonable amount of time, but in no event may the time exceed ninety (90) calendar days, from presentation of the City's audit findings to the Awardee. Awardee shall include this right to audit section in any subcontractor agreements entered into in connection with this contract.

4.34 CITY OF TAMPA ETHICS CODE. The Bidder shall comply with all applicable governmental and city rules and regulations including the City's Ethics Code which is available on the City's website. (City of Tampa Code, Chapter 2, Article VIII. - Section 2-522)

Moreover, each Bidder responding to this Invitation to Bid or Request for Proposal acknowledges and understands that the City's Charter and Ethics Code prohibit any City employee from receiving any substantial benefit or profit out of any contract or obligation entered into with the City, or from having any direct or indirect financial interest in effecting any such contract or obligation. The Awardee shall ensure that no City employee receives any such benefit or interest as a result of the award of this Invitation to Bid or Request for Proposal. (City of Tampa Code, Chapter 2, Article VIII. - Section 2-514(d)).

Please note that the City's Ethics Code may be accessed on the Internet by utilizing the website link http://www.tampagov.net/human-resources/info/lobbyist-information or can be found in the City of Tampa's municipal codes published online by the Municipal Code Corporation at the website link https://www.municode.com/library/fl/tampa/codes/code_of_ordinances. Printed copies of the Ethics Code can also be obtained from the City Clerk's Office for a fee of $0.15 cents a page.

4.35 SCRUTINIZED COMPANIES. Section 287.135, Florida Statutes prohibits agencies from contracting with companies for goods or services of any amount that are (1) on the Scrutinized Companies that Boycott Israel List, created pursuant to Section 215.4725, Florida Statutes or are engaged in a boycott of Israel, and (2) with companies for goods or services of $1 million or more, that are on either the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, created pursuant to section 215.473, Florida Statutes or are engaged in business operations in Cuba or Syria.

A company that is on the Scrutinized Companies that Boycott Israel List or is engaged in a boycott of Israel may not bid on, submit a proposal for, or enter into a contract or renew a contract with an agency or local government entity for goods or services of any amount.

A company that is on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List or is engaged in business operations in Cuba or Syria may not bid on, submit a proposal for, or enter into a contract or renew a contract with an agency or local government entity for goods or services of $1 million or more.

Notwithstanding the aforementioned, the City may on a case-by-case basis permit a company on the Scrutinized Companies with Activities in Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, the Scrutinized Companies that Boycott Israel List, or are engaged in business operations in Cuba or Syria to be eligible for, bid on, submit a proposal for, or enter into or renew a contract for goods or services if the conditions set forth in Section 287.135(4) of the Florida Statutes are met.

If the City determines the Bidder submitted a false certification under Section 287.135(5) of the Florida Statutes upon submission of a bid or proposal, entering into a contract, on contract renewal, or if the Awardee has been placed on the Scrutinized Companies with Activities in the Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List or is on the Scrutinized Companies that Boycott Israel List or is engaged in a boycott of Israel or is engaged in business operations in Cuba or Syria, the City shall either terminate the contract after it has given the Awardee notice and an opportunity to demonstrate the City's determination of false certification was in error pursuant to Section 287.135(5)(a) of the Florida Statutes.

4.36 CONTRACT LITIGATION/LEGAL PROCEEDINGS. The Bidder shall identify any conditions (i.e. bankruptcy, pending and/or existing litigation, planned office closures, impending merger/acquisition) that may impede the Proposer's ability to perform the services set forth in this Bid. Bidder shall provide in detail information on the nature and magnitude of any litigation or proceeding whereby, currently or during the past five (5) years, a court or any administrative agency has ruled against the company in any matter related to the professional activities of the company.

This shall include any class actions wherein your company was named, industry investigations by Attorneys General, in addition to individual cases.

Bidder shall identify any pending lawsuits, past litigation relevant to subject matter of this Bid or litigation involving any unauthorized release of client confidential information, providing a statement of any litigation or pending lawsuits that have been filed against the Bidder's company currently or within the last five (5) years. If an action has been filed, state and describe the litigation or lawsuit filed, and identify the court or agency before which the action was instituted, the applicable case or file number, and the status or disposition for such reported action. If no litigation or lawsuit has been filed against the company, provide a statement to that effect.

Bidder shall provide information concerning any current or past bankruptcy proceedings currently or within the last five (5) years for any voluntary or involuntary declarations of bankruptcy concerning the company, partner or subsidiary, subcontractors, or any corporate officer with details of such proceedings.

Bidder must also provide information as to whether the Proposer or an affiliate of Bidder is currently or has in the last five (5) years ever pledged any interest in all or any portion of any current or future payment as collateral, including for example as part of an accounts receivable factoring program. If yes, please provide information identifying the type of arrangement, date of the arrangement, and name of the party to whom the interest was pledged.

4.37 MINIMUM WAGE AMENDMENT. The Awardee/Contractor shall comply with the minimum wage requirements as required in Article X, Section 24, Constitution of the State of Florida as of May 2, 2005.

The rate of wages for all persons employed by the Awardee/Contractor on the work covered shall not be less than the rate of wages required by the Fair Labor Standards Act (Public Law 104-188) enacted August 20, 1996.

4.38 DATA COLLECTION. Pursuant to Section 119.071(5)(a), Florida Statutes, social security numbers collected from bidders are used for identification, verification, and tax reporting purposes.

4.39 INVOICING. The Awardee shall furnish the City complete itemized invoices for the services performed. Invoices are to reflect the prices stipulated on the purchase order and as outlined in this bid/proposal document on the bid response/pricing sheets. The City will not accept an aggregate invoice. As part of the award process, the City may request a sample invoice. Invoices shall contain, but not be limited to the following information:

- Invoice number;
- Company Name;
- Purchase order number;
- Location and dates of service;
- COT Service Report;
- Cost of services as stated on Bid Response and extended price to reflect total cost for number of services performed.

At the time of submission of its invoices, the Awardee shall submit to the CITY a report on From MBD-30, "DMI-Payments" of all sub-contract contract amounts and payments along with any other completed reports or forms as may be required by the CITY. In the event the Awardee uses any WMBE and/or SLBE sub-contractors, the Awardee shall provide form MBD-40 "Letter of Intent" (LOI) for all WMBE and/or SLBE sub-contractors the Awardee intends to utilize.

- Form MBD-30 DMI Sub-(Contractors/Consultant/Suppliers) Payments
- Form MBD-40 Letter of Intent (LOI)

4.40 SUB-CONTRACTING SUBMITTALS. No Awardee shall assign the award/contract or any rights or obligations thereunder without the written consent of the City. **The Awardee shall be required to perform with its own forces at least fifty-one (51) percent of the work, unless written consent to subcontract a greater percentage of the work first obtained by the City.** In the event of such approved subcontracting, the Awardee agrees to provide the City with written documentation relative to the Subcontractor(s) solicited, or that will be employed in this award, including but not limited to submittal of attached the following Schedule of Sub-Contracting Forms:

- Schedule of All Sub-Contractors/Consultants/Suppliers Solicited - MBD 10
- Schedule of Sub-Contractors/Consultants/Suppliers to be Utilized - MBD 20

These forms must be completed (including signatures) and submitted with all bids or proposals. Submittals that do not contain these completed forms shall be deemed "non-responsive". Instructions on completing the forms are included after each form in this bid package.

Subcontractor shall be defined as; a business enterprise, firm, partnership, corporation, consultant or combination thereof having a direct contract with a prime contractor for any portion of the advertised work that is awarded by the owner/owner's representative.

Supplier shall be defined as; a business enterprise that either directly contracts with a Prime Contractor/Consultant or directly contracts with a Subcontractor under such Prime Contractor/Consultant to provide materials, supplies or equipment in connection with a Contract awarded by the owner/owner representative. A Supplier may be a regular dealer, distributor or manufacturer.

4.41 CONFLICT OF INTEREST. The City requires that the Bidder provide professional, objective, and impartial advice and at all times hold the City's interest(s) paramount, strictly avoid conflicts with other assignments or their own corporate interests and act without any consideration for future work. The Bidders have an obligation to disclose any situation of actual or potential conflict that impacts their capacity to serve the best interest of the City, or that may reasonably be perceived as having this effect. If the City, in its sole discretion, determines that a conflict of interest exists, such Bidder shall not be considered for award. Failure to disclose said situations may lead to the disqualification of the Bidder or the termination of its award.

Any such interests on the part of the Bidder or their employees, must be disclosed in writing to the City on ATTACHMENT A - CONFLICT OF INTEREST DISCLOSURE FORM that is included with this solicitation document. Also, the Bidder is aware of the conflict of interest laws of the State of Florida and the City of Tampa and agrees that they shall fully comply in all respects with the terms of said laws.

4.42 GOVERNING LAW/VENUE. The laws of the State of Florida (without giving effect to its conflicts of law principles) govern all matters arising out of or relating to this solicitation, including, without limitation, its interpretation, construction, performance, and enforcement. The parties hereto submit to the exclusive jurisdiction and venue of the state and federal courts located in Hillsborough County, Florida.

4.43 PAYMENT. Full payment will be made by the City after receipt and acceptance of materials/services and proper invoice in accordance with Florida Statutes § 218.70, et. seq., the Local Prompt Payment Act. Bidders that accept Visa/MasterCard payments can be enrolled in the City's ePayments program for faster payment turnaround, by contacting the City's Accounts Payable Department at acctspayable@tampagov.net.

4.44 EMPLOYEE VERIFICATION. In accordance with Section 448.095, Florida Statutes, the Awardee/Contractor agrees to register with and utilize the U.S. Department of Homeland Security's E-Verify system to verify the employment eligibility of all new employees hired during the term of the award/contract for the services specified in the award/contract. The Awardee/Contractor must also include a requirement in subcontracts that the subcontractor must register with and utilize the E-Verify system to verify the employment eligibility of all new employees hired by the subcontractor during the award/contract term. If the Awardee/Contractor enters into a contract with a subcontractor, the subcontractor must provide the Awardee/Contractor with an affidavit stating that the subcontractor does not employ, contract with, or subcontract with an unauthorized alien. The Awardee/Contractor shall maintain a copy of such affidavit for the duration of the award/contract. If the City has a good faith belief that the Awardee/Contractor has knowingly violated Section 448.09(1), Florida Statutes, the City shall terminate the Contract with the Awardee/Contractor, and the Contractor may not be awarded a contract with the City for at least 1 year after the date on which the award/contract was terminated. The Awardee/Contractor is liable for any additional costs incurred by the City as a result of the termination of the award/contract. If the City has a good faith belief that a subcontractor knowingly violated the law, but the Awardee/Contractor has otherwise complied with the law, the City shall promptly notify the Awardee/Contractor and order the Awardee/Contractor to immediately terminate the award/contract with the subcontractor.

4.45 FORCE MAJEURE. If a Force Majeure Event occurs, the party that is prevented by that Force Majeure Event from performing any one or more obligations under this award/contract (the "Nonperforming Party") will be excused from performing those obligations, on condition that it complies with its obligations herein. "Force Majeure Event" means, with respect to the Nonperforming Party, any event or circumstance, regardless of whether it was foreseeable, which was not caused by the Nonperforming Party, which prevents the Nonperforming Party from complying with any of its obligations under this award/contract, on condition that the Nonperforming Party uses reasonable efforts

to comply with its obligations, except that a Force Majeure Event will not include any strike or other labor unrest that affects only one party, economic hardship of a party, an increase in prices, changes in market conditions, or a change of law. Upon the occurrence of the Force Majeure Event, the Nonperforming Party shall notify the other party in writing within ten (10) days of the occurrence of that the Force Majeure Event, its effect on performance, and how long that party expects the Force Majeure Event to last. Thereafter the Nonperforming Party shall update the other party as reasonably necessary. During a Force Majeure Event, the Nonperforming Party shall use reasonable efforts to limit damages to the other party and to resume its performance under this award/contract. The other party has the right to terminate the award/contract if the Non-Performing Party's Force Majeure Event continues for more than a reasonable time.

5. INDEMNIFICATION. The Contractor/Successful Proposer/Awardee/Firm (collectively the "Firm") releases and agrees to defend, indemnify and hold harmless the City of Tampa, its officers, elected and appointed officials, and employees from and against any and all liabilities, claims, suits, damages, charges, or expenses (including attorney's fees, whether at trial or appeal) which the City may suffer, sustain, incur, or in any way be subjected to by reason or as a result of any act, negligence, or omission on the part of the Firm, its agents or employees, in the execution or performance of the obligations assumed under or incidental to, the Award/Contract/Agreement (collectively the "Agreement") into which the Firm and the City will enter, except when caused solely by the fault, failure, or negligence of the City, its agents, or employees. Where the Agreement is for a construction contract for the City, this Section shall be limited to the provisions of Section 725.06, Florida Statutes, with the greater of $1 Million Dollars or a sum equal to the total contract price set as the monetary limitation on the extent of the indemnification.

6. NON-DISCRIMINATION IN CONTRACTING AND EMPLOYMENT

The following provisions are hereby incorporated into any contract executed by or on behalf of the City of Tampa. The Awardee shall comply with the following Statement of Assurance:

During the performance of this Award, the Awardee herein assures the City, that said Awardee is in compliance with Title VII of the 1964 Civil Rights Act, as amended, the Florida Civil Rights Act of 1992, and the City of Tampa Code of Ordinances, Chapter 12, in that the Awardee does not on the grounds of race, color, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, familial status, or marital status, discriminate in any form or manner against said Awardee's employees or applicants for employment.

Awardee understands and agrees that this award is conditioned upon the veracity of this Statement of Assurance, and that violation of this condition shall be considered a material breach of this award. Furthermore, the Awardee herein assures the City that said Awardee will comply with Title VI of the Civil Rights Act of 1964 when federal grant(s) is/are involved. This Statement of Assurance shall be interpreted to include Vietnam-Era Veterans and Disabled Veterans within its protective range of applicability.

Awardee further acknowledges and agrees to provide the City with all information and documentation that may be requested by the City from time to time regarding the solicitation, selection, treatment and payment of subcontractors, suppliers and vendors in connection with this award. Awardee further acknowledges that it must comply with City of Tampa Code of Ordinances, Chapter 26.5.

Per City of Tampa Code of Ordinances, Section 2-284, Bidder(s) shall perform criminal history screenings similar in nature to the practices contained in Chapter 12, Article VI, City of Tampa Code of Ordinances. The City of Tampa's municipal codes are published online by the Municipal Code Corporation at the website link https://www.municode.com/library/fl/tampa/codes/code_of_ordinances.

6.1 EQUAL OPPORTUNITY

The City of Tampa hereby notifies all Bidders that all eligible businesses, including Small Local Business Enterprises (SLBEs) and Women/Minority Business Enterprises (WMBEs) will be afforded a full opportunity to participate in any Award made by the City of Tampa pursuant to this present proposal matter and will not be subjected to discrimination on the basis of race, color, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, familial status, or marital status. The City of Tampa prohibits any person involved in City of Tampa contracting and procurement activities, to discriminate on the basis of race, color, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, familial status, or marital status.

For additional information please visit the Equal Business Opportunity Office at: http://www.tampagov.net/ebo

7. INSURANCE. This award is subject to the attached and incorporated CITY OF TAMPA INSURANCE REQUIREMENTS included as Exhibit 1 of this bid document which should be reviewed for complete insurance details and coverage requirements.

TECHNICAL SPECIFICATIONS FOR
PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, AND INSTALLATION, REPAIRS AND REPLACEMENT

8. PRODUCTS OR SERVICES TO BE PROVIDED

Bids are being requested and will be evaluated on the basis of a minimum fixed percentage discount from Bidder's most current catalog(s) for site furnishings, playground equipment and surfacing, installation, repairs and replacement in order to produce the lowest net cost for the City of Tampa Parks and Recreation Department.

8.1 Bidders shall provide a firm, fixed discount that will be applied to all items in the Bidder's current catalog(s), CD(s), or printed price sheet(s). If discount varies by manufacturer, indicate that on the bid response page/Attachment B – Products List.

9. INSTALLATION, REPAIRS AND REPLACEMENT SERVICES

9.1 Play equipment must meet or exceed Consumer Products Safety Commission (CPSC) Guidelines and American Standard and Testing Material (ASTM) Standards or equivalent. IPEMA Certification is desired but not required. Installation of shelters, shade structures, gazebos, trellises, etc. shall conform to the appropriate ASTM and industry standards.

9.2 Installation, repair and replacement services must be according to relative industry standards such as ASTM, National Playground Safety Institute or equivalent.

9.3 Fall zone material and installation must adhere to industry related standards to include CPSC and ASTM.

9.4 Any and all damages to grounds, site furnishings, lighting, underground utilities, buildings, paving, landscape trees, shrubs, turf and groundcover, City owned, or leased equipment shall be corrected by the Awardee(s) at no additional cost to the City.

9.5 Awardee(s) must coordinate all utility locations to be marked on site prior to any excavation.

9.6 All work must be inspected prior to approval. Payments are based on successful inspection.

9.7 Permits may be paid and/or reimbursed by the City of Tampa upon prior approval from Department Representative.

9.8 Bidders providing a service must hold an Occupational or Business License. In accordance with Florida Statutes 205.065, a current Department of Professional Regulation certificate may be provided in lieu of an Occupational License, please submit a copy of certificate(s) or license(s) with Bid submittal.

9.9 All equipment/products and/or installation, repair or replacement must be approved by Department Representative upon completion.

9.10 Catalogs and price sheets for all site furnishings, playground equipment, site-related products, and any surfacing or paving related products that you would like to be considered as part of this Bid must be submitted with the Bid.

9.11 All freight charges must be included in the individual project quote.

9.12 Awardee responsible for securing work zone and all materials or equipment left on site, and the price shall be included on the individual project quote.

9.13 The Awardee/Sub-contractor shall be responsible for unpacking, uncrating and installation at job site in accordance with specifications and removal of all trash and debris.

9.14 Installation, repair and replacement contractors must provide written certification that they are certified/authorized to install playground equipment as required by the manufacturer along with the quote/ proposal. Each Foreperson on site supervising installation must have NPSI (National Playground Safety Institute)

certification or at least one member of the crew on site must have NPSI certification, proof of certifications may be requested by Department Representative prior to installation. The installing contractor must provide a certificate or signed letter stating, "This equipment has been installed according to manufacturer's specifications and meets the standards of any applicable certifying organization". Letter or certificate must be provided at time of final inspection.

10. ENGINEERED WOOD FIBER MULCH (Must meet or exceed "Fibar")

10.1 The mulch shall meet the United States Consumer Product Safety Commission ASTM F2075 requirements for engineered wood fiber for use as a Playground Safety Surface Under and Around Playground Equipment, ASTM F1292 requirements for Impact Attenuation of Surfacing materials Around Playground Equipment and be Chromated Coper Arsenate (CCA) Free. The mulch must also be free of foreign matter to be considered acceptable. If the material is not per specifications, the Awardee has within 24 hours to remove the mulch at no additional cost to the City.

10.2 Must submit manufacturer's specification product data sheet and a quart size plastic bag sample of the engineered wood fiber mulch to be evaluated by the City of Tampa project manager.

10.3 Please indicate on the Bid Response Page a price for Engineered Wood Fiber Mulch per cubic foot and square foot.

11. SURFACING PRODUCTS (POUR-IN-PLACE)
Must meet or exceed "Surface America Poured-In-Place 3-Part"

11.1.1 Must meet or exceed the following criteria:
Bonded rubber Poured-In-Place:

11.1.2 Polyurethane.
11.1.3 Blend of 100% recycled SBR (styrene butadiene rubber) and urethane.

11.2 Shock Attenuation (ASTM F1 292):

11.2.1 Gmax: Less than 200.
11.2.2 Head Injury Criteria: Less than 1000.

11.3 Flammability (ASTM D2859)
11.4 Tensile Strength (ASTM D4 I 2): 60 psi (4113 kPa).
11.5 Tear Resistance (ASTM D6240: 140%
11.6 Water Permeability: 0.4 gal/yd2/second.
11.7 Accessibility: Comply with requirements of ASTM F195 I.
11.8 Required mix proportion by weight:

11.8.1 Base mat: 16+% urethane (as ratio: 14% urethane divided by 86% rubber). 14 % urethane, 86% rubber (based on entire rubber & urethane mis).

11.8.2 Top Surface: 22% urethane (ration: 18% urethane divided by 82% rubber). 18 % urethane, 82% rubber (based on entire rubber & urethane mix).

11.9 Must meet current ASTM specification for determination of accessibility to surface systems under and around playground equipment.

11.10 Attach to the Bid Response Page for surfacing product and must be included in your bid response stating:

11.10.1 List pricing based on thickness and color options.
11.10.2 This price sheet may not contain other terms and/or conditions.
11.10.3 Your company name must clearly be indicated on the attached price sheet.
11.10.4 Prices must be stated per square foot and must include all materials, binder adhesives, non-woven geotextile membrane, delivered, supplied and installed.

11.11 Must submit manufacturer's specification product data sheet and a 4" X 6" sample to be evaluated by the Department Representative to evaluate.

12. CATALOG(S), CD(S) OR PRINTED PRICE SHEET(S) WITH BID

All Bidders must submit two (2) CD(s), catalog(s) or printed price sheet(s) to be used with their bid submittal.

13. CATALOG(S), CD(S) OR PRINTED PRICE SHEET(S) UPDATED ANNUALLY

Each year as new catalog(s), CD(s) or printed price sheet(s) are published the Awardees shall furnish new catalog(s), CD(s) or printed price sheet(s) to the Department Representative.

14. UPDATING OF CATALOG(S), CD(S) OR PRINTED PRICE SHEET(S)

Bid pricing will be held to the current catalog(s), CD(s) or printed price sheet(s) in use by the City of Tampa Parks and Recreation Department. Price increases will not be allowed until a new catalog has been approved by the Department Representative and price sheets are emailed to celeste.gibbons-peoples@tampagov.net or mailed to City of Tampa Purchasing Department, 306 East Jackson Street, 2E, Tampa, FL 33602. Once approved, it will be the Awardee's responsibility to distribute an ample supply of catalog(s), CD(s) or printed price sheet(s) to the Parks and Recreation Department. Booklets and prices used to adjust catalog(s), CD(s) or printed price sheet(s) pricing will not be acceptable. This process shall be followed during any and all catalog changes

15. BID PRICING & CATALOG DISTRIBUTION

Bid and individual project quote pricing will be held to the current catalog approved pricing in use by the City of Tampa.

16. NEW ITEMS

New items appearing in the Awardee's catalog released after the bid opening date are to be covered by the same terms and conditions as indicated in the bid.

17. DELIVERY TERMS

17.1 DELIVERY POINT FOR EQUIPMENT

Delivery is FOB Destination. If there are any delivery charges, the price must be notated on the project proposal and invoice as a separate line item. The delivery address(es) will be listed on the purchase order. No common carrier/drayage charges will be honored by the City of Tampa.

17.2 DELIVERY TIME

Orders shall be placed as needed and expected delivery time frame shall be included when quotes are given to the City. Delivery time frame from receipt of purchase order may determine which vendor receives the order.

17.3 HOURS OF DELIVERY

Deliveries shall be made between the hours of 8:00 a.m. and 3:00 p.m. except on Saturdays, Sundays, or holidays when all Facilities may be closed to receive deliveries.

17.4 F.O.B. POINT

Inspection and acceptance will be F.O.B. Destination unless otherwise provided. Title to/or risk of loss or damage to all items shall be the responsibility of the Awardees until acceptance by the City. If the materials or services supplied to the City are found to be defective or not to conform to specifications, the City reserves the right to cancel the order and product will be returned and shall be at the Awardee(s) expense.

18. LABELING

Each carton, package, box and/or container shall be labeled. Each label shall identify each carton as follows:

18.1 Name of item and Model number, if applicable
18.2 Quantity of item contained
18.3 Purchase Order Number
18.4 Company

19. DAMAGED ITEMS

In the event an item is received, and it is later determined there is concealed damage when the item is unpacked, the item must be replaced by the Awardee at no cost to the City.

20. INSTALLATION

20.1 The Awardee(s) shall provide all barricades and take all necessary precautions to protect building site, supplies, equipment, tools and personnel. All work shall be complete in every respect and accomplished in a workmanlike manner and the Awardee shall provide for removal of all debris from the City premises.

20.1.1 Where installation is required, the Awardee shall deliver, unload, set in place, install, make ready to run, and test (test to be accomplished in the presence of an authorized representative of the City). The Awardee shall provide a qualified person, at no extra cost, to assure performance of the item and to make the initial start-up and achieve the successful testing. Upon completion of the successful testing of the item, the authorized representative of the City shall inspect and accept. All miscellaneous installation materials shall be included in the Total Turnkey price. The miscellaneous installation materials include the following: conduit, wire, fiber, connectors, fittings, boxes, concrete footings, etc. All materials used in the installation shall be of good quality and shall be free of defects that would diminish the appearance of the product or render it structurally or operationally unsound.

20.1.2 Installation includes the furnishing of any equipment, rigging, hardware, and materials required to install, repair or replace the product in the proper location. Awardee shall protect the site from damage and shall repair damages or injury caused during the installation by the Awardee or its employees or agents. If any alteration is required to the site or building to achieve installation, the Awardee shall promptly restore the structure or site to its original condition. Awardee shall perform installation work so as to cause the least inconvenience and interference with the City's operations, and with proper consideration of others on site. Upon completion of the installation, the location and surrounding area of work shall be left clean and in a neat and unobstructed condition, with everything in satisfactory repair and order.

21. GUARANTEED QUANTITIES

No guarantee is given or implied as to the total quantity or dollar value of this Bid. The City is not obligated to place any order with any Awardee participating in this Bid. The City, however, will be urged to refer to catalogs and discounts of Awardee(s) in their attempt to fill their requirements at the lowest net prices.

22. METHOD OF ORDERING

Items shall be ordered via individual purchase orders on an "as needed" basis for the term of the Award. Invoices must be submitted against each individual purchase order.

23. ORDERS

The City will issue purchase orders directly to the Awardee(s) for the purchase of Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement. The Awardee(s) will be expected to honor these orders according to the discount terms and conditions listed in this bid. Each purchase order will be faxed or mailed to the Awardee(s). The order should be reviewed for correct prices, catalog numbers, extensions, etc.

24. NO DAMAGES FOR DELAY

Awardee is not entitled to any additional compensation or increase in the contract sum for direct, indirect, impact, storage, or any other damages arising because of any hindrance or delays caused by the owner or any other cause whatsoever. Awardee's only remedy for delay, not caused or exacerbated by the Awardee(s), shall be an extension of time to complete the Awardee's scope of work. Any extension of time for an order, shall be granted at the sole discretion of the Department Representative.

25. SUBSTITUTES

Unapproved substitutes shall not be allowed. If items are not available, the Department noted on the purchase order must be contacted prior to shipment in order to determine if a substitute is acceptable.

BIDDER'S AFFIDAVIT

Before me, the undersigned authority who is duly authorized by law to administer oaths and take acknowledgements, personally appeared

_____

AFFIANT'S NAME (PERSON'S NAME)

Who, after being duly cautioned and sworn, and being fully aware of the penalties of perjury, does hereby depose and declare, on his/her own behalf or as a representative on behalf of a partnership or corporation, or other entity that is the Bidder in the matter at hand, as follows:

1. That the Bidder, if a natural person, is of lawful age.

2. That if the Bidder is a partnership, or a corporation, or other legal person or entity recognized in the State of Florida, it has complied with all laws and ordinances governing the formation and continued existence of such entities, including but not limited to, if a Florida corporation, to the filing of its Articles of Incorporation with the Florida Secretary of State and if a corporation incorporated under the laws of a state other than Florida, that it is duly authorized to do business in the State of Florida; that it is currently an active corporation or entity fully authorized to do business; and that the undersigned is representative of the corporation or entity authorized to make this affirmation and declaration and who has the power to bind said corporation or entity.

3. That if the Bidder is operating under a fictitious name, Bidder has currently complied with and any and all laws and procedures governing the operation of businesses under fictitious names in the State of Florida;

4. That the Bidder has not submitted a rigged Bid, nor engaged in collusive bidding, or a collusive bidding arrangement, or fraudulent bidding, or entered into a conspiracy in connection with this bid with any other natural person, partnership, corporation or other entity making a bid for the same purpose. The Bidder has not entered into any understanding or agreement with any other person or entity where one or more such persons or entities agrees not to bid or fixing the prices to be bid.

5. In the event that the City determines that the Bidder has participated in any collusive, deceptive or fraudulent practices in derogation of the statements in this Affidavit the City, in addition to any other remedy it may exercise, will have the right to debar the Bidder. The contract let under such circumstances shall be deemed invalid.

6. That the Bidder is not in arrears to the City of Tampa upon debt or contract and is not in default, as surety or otherwise, of any obligation to the City, Hillsborough County or the State of Florida

7. That no officer or employee of the City, either individually or through any firm, corporation or business of which he/she is a stockholder or holds office, shall receive any substantial benefit or profit out of the contract or award to this Bidder; nor does the Bidder know of any City officer or employee having any financial interest in assisting the Bidder to obtain, or in any other way effecting, the award of the contract to this Bidder.

8. That, by submitting this bid, the Bidder certifies that he/she has fully read and understands the bid method and has full knowledge of the scope, nature, and quality of work to be performed or the services to be rendered.

9. That, by submitting this Bid, Affiant certifies compliance with Section 287.135, Florida Statutes and for contracts for goods or services of $1 million or more, that the Bidder is not on the Scrutinized Companies with Activities in the Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, and is not engaged in business operations in Cuba or Syria, and that for contracts for goods or services of any amount, that the Bidder is not on the Scrutinized Companies that Boycott Israel List, and is not engaged in a boycott of Israel. Affiant understands that pursuant to Section 287.135, Florida Statutes, the submission of a false certification may subject Bidder to civil penalties, attorney's fees, other costs and termination of any contract that is awarded.

The bid documents contain a General Conditions Section and may, in most cases, contain a Technical Specification Section. General Conditions contain general requirements and Technical Specifications detail the scope of the goods and/or services requested. The Technical Specifications shall always govern whenever there appears to be a conflict.

The Bidder shall comply with the applicable requirements of Federal and state laws, all Codes and Ordinances of the City of Tampa as amended from time to time and any applicable professional regulations.

FURTHER AFFIANT SAYETH NOT.
Bidder: Complete the applicable Acknowledgement for An Individual Acting In His/Her Own Right, A Partnership or A Corporation, according to your firm type.

FOR AN INDIVIDUAL ACTING IN HIS/HER OWN RIGHT

State of _____
County of _____

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization this _____ day of _____20____, by _____, who is personally known to me or who has produced identification and who did (did not) take an oath.

_____ _____
Signature of Notary Public Signature of Affiant

Notary Public
State of: _____
My Commission
Expires: _____

_____ _____
Printed, typed or stamped Printed or typed name of Affiant
Commissioned name of notary public

FOR AN ENTITY

State of _____
County of _____

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization this ____ day of _____20____, by _____, as _____, of _____ a ☐ Partnership, ☐ Joint Venture, ☐ Corporation, ☐ Limited Liability Company (LLC) or ☐ Other _____, on behalf of such entity. Such individual is personally known to me or has produced identification.

Type of identification produced: _____

_____ _____
Signature of Notary Public Signature of Affiant

Notary Public
State of: _____
My Commission
Expires: _____

_____ _____
Printed, typed or stamped Printed or typed name of Affiant
Commissioned name of notary public

BIDDER SUBMITTAL CHECKLIST
BID DOCUMENTS TO BE RETURNED

BID #: 31041421	
BID TITLE: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, AND INSTALLATION, REPAIRS AND REPLACEMENT	
THE FOLLOWING FORMS MUST BE INCLUDED IN BID PACKAGE PLEASE ACKNOWLEDGE BY ANSWERING "YES"	
	YES
Did you sign your bid? *	☐
Did you sign and complete MBD Forms 10 and 20? *	☐
Did you fully complete the price proposal /bid response page? *	☐
Did you complete the Bidder's Affidavit and associated notarized form? *	☐
If an addendum has been issued that changed the Bid Response Page(s), did you provide pricing on the pages marked "Addendum" *	☐
Did you include catalogs, price sheets and or CD's as indicated per Technical Specification? *	☐
Did you include copies of certificates and or licenses as indicated per Technical Specification? *	☐
Did you include pricing for Engineered Fiber Wood Mulch per Technical Specification? *	☐
Did you include Manufacture Specifications as per Technical Specification? *	☐
Did you List pricing based on thickness and color options per Section 11 of the Technical Specifications?*	☐
Is your company name clearly be indicated on the attached price sheet?*	☐

*** Failure to submit these forms shall result in your bid being deemed as "non-responsive".**

Requested Voluntary Information Regarding
Bidder's Initial Employment Application Content

The Bidder's own initial application for employment has criminal history screening practices similar in nature to the practices contained in Chapter 12, Article VI – Criminal History Screening Practices, City of Tampa Code of Ordinances. *(Responses, whether "Yes" or "No", are for informational purposes only and will not be used as a basis of award or denial, nor as a basis for any protest)*: [_] Yes [_] No

Firm Name: _____

Authorized signature: _____ Date: _____

ATTACHMENT A - CONFLICT OF INTEREST DISCLOSURE FORM

For purposes of determining any possible conflict of interest, all bidders/proposers, must disclose if any elected or appointed officer of the City of Tampa, City of Tampa employee(s), or any immediate family member* or close personal relation** of an elected or appointed officer of the City of Tampa or City employee(s) is also an owner, corporate officer, agent, employee, stockholder, or has a controlling financial interest***, etc., of their business.

**Immediate family* means spouse, parents and children of the person involved.

***Close personal relationship* means dating, cohabitation, and/or having an intimate sexual relationship. Dating includes but is not limited to casual dating, serious dating, or casual sexual involvement where the parties have no intention of carrying on a long-term relationship, cohabitation, and any other conduct or behavior normally associated with romantic or sexual relationships. This definition applies regardless of the sexual orientation of the employees involved. Persons involved in a close personal relationship shall be referred to as a "close personal relation."

****Controlling financial interest* means ownership, directly or indirectly, to ten (10) percent or more of the outstanding capital stock in any corporation or a direct or indirect interest of ten (10) percent or more in a firm, partnership, or other business entity or such other interest or position in a business entity sufficient to allow him/her or her to control its operations.

Indicate either "yes" (a City employee, elected or appointed official is also associated with your business), or "no". If yes, give person(s) name(s) and position(s) with your business.

YES _____ NO _____

NAME(S) / POSITION(S)

_____

_____

_____

_____

FIRM NAME: _____

BY (PRINTED NAME): _____

BY (SIGNATURE): _____

TITLE: _____

DATE: _____

BID RESPONSE FOR
SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT

Please Print or Type

We the undersigned, as Bidders, hereby declare that we have carefully read this proposal or bid and the provisions, terms and conditions concerning the equipment, materials, supplies or services as called for, and with full knowledge and understanding of the requirements and conditions, do hereby agree to furnish and to deliver as indicated, FOB, City Facility Location, with all transportation charges prepaid, and for the prices quoted thereon as follows.

I. **Site Furnishings and Playground Equipment**	**Catalog Name**	**Date**	**Discount**
a. Catalog			
b. Catalog			
C. Catalog			
d. Catalog			
e. Catalog			
f. Catalog			

If additional space is needed, attach additional pages using headings as indicated above

2. Installation of Site Furnishings, Playground Equipment, Shelters, Shade Structures, Gazebos, and Trellises, Etc. To be based on a firm fixed percentage of the equipment cost (the total cost after discount has been taken, but before freight has been added).	The firm, fixed percentage is _____%
3. Is your written factory certification for the installation of playground equipment attached?	Yes No
4. If you are using a subcontractor for the installation of playground equipment list the Certified Installer's Company Name/s:	Name: _____
5. Does your company provide repair service?	Yes No $_____/hour
6. Engineered Wood Fiber Mulch (to include ground preparation and Geotextile separator installation) Is manufacturer's specification data sheet attached?	Yes No $_____ per Cu. Ft $_____ per Sq. Ft

7. Surfacing Products (Poured-In-Place Rubber, Artificial Turf, FlexiPave, Concrete and Brick Pavers) Is price table attached Is manufacturer's specification data sheet attached? Have samples been submitted?	Yes Yes Yes	No No No
8. Have you submitted catalog(s), CD(s) or printed price sheet(s) to be considered as part of this bid? Failure to submit may disqualify your bid.	Yes	No
9. Minimum order?	Yes If so, $_____	No

10. List any Exclusions:
11. Contact Information: Name: _____ Phone: _____ Cell: _____ Email: _____

Firm Name: _____

Authorized Representative's Name: _____

Authorized Representative's Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone No.: _____ Fax No.: _____ Email: _____

Federal I.D. #: _____

Type Organization: [ ] Individual [ ] Small Business [ ] Non-Profit [ ] LLC
[ ] Partnership [ ] Corporation [ ] Joint Venture

Business is licensed (unless exempt by applicable law), permitted and certified to do business in the State of Florida:
[ ] Yes [ ] No License # _____

Minority Business Status: [ ] Black [ ] Hispanic [ ] Woman [ ] Other

Is your business certified as a minority business with any government agency? [ ] Yes [ ] No. If yes, please list below:

Agency Name	Certification Number	Expiration Date

Sub-Contracting Submittals required: Forms MBD-10, MBD-20 must be submitted with the bid/proposal.

By signing this bid the Bidder complies with all of the requirements of the bid including but not limited to Communication Policy and City of Tampa Ethics Code contained in Section 4 of the GENERAL CONDITIONS.

Authorized Signature: _____ Date: _____

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules
City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)
(FORM MBD-10)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421
Company Name:_____ Address:_____
Federal ID:_____ Phone:_____ Fax:_____ Email:_____

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.
[ ] No Firms were contacted or solicited for this contract.
[ ] No Firms were contacted because:_____
[ ] See attached list of additional Firms solicited and all supplemental information (List must comply to this form)
Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=WMBE O = Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N

Failure to Complete, Sign and Submit this form with your Bid or Proposal Shall render the Bid Non-Responsive (Do Not Modify This Form)

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub–contracting opportunities on this contract.

Signed:_____ Name/Title:_____ Date:_____

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive
Forms must be included with Bid / Proposal

MBD 10 rev./effective 02/2016

Page 2 of 4 – DMI Solicited/Utilized

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) Solicited Form (Form MBD-10)

This form must be submitted with all bids or proposals. **All** subcontractors (regardless of ownership or size) solicited and subcontractors from whom unsolicited quotations were received must be included on this form. The instructions that follow correspond to the headings on the form required to be completed. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Firms were contacted or solicited for this contract.** Checking the box indicates that a pre-determined Subcontract Goal or Participation Plan Requirement was not set by the City resulting in your business not using subcontractors and will self-perform all work. If during the performance of the contract you employ subcontractors, the City must pre-approve subcontractors. Use of the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: Certified SLBE or WMBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors.
- **No Firms were contacted because.** Provide brief explanation why no firms were contacted or solicited.
- **See attached documents.** Check box, if after you have completed the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the form. All DMI data not submitted on the MBD Form-10 must be in the same format and have all requested data from MBD Form-10 included.

The following instructions are for information of any and all subcontractors solicited.

- **"S" = SLBE, "W" = WMBE.** Enter "**S**" for firms Certified by the City as Small Local Business Enterprises and/or "**W**" for firms Certified by the City as either Women/Minority Business Enterprise; **"O" = Non-certified others**.
- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification and payment of the contractor/subcontractor.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials** indicate the trade, service, or materials provided by the subcontractor. NIGP codes aka "National Institute of Governmental Purchasing" are listed at top section of document.
- **Contact Method L=letter, F=fax, E=Email, P=Phone.** Indicate with letter the method(s) of soliciting for bid.
- **Quote or Resp. (response) Rec'd (received) Y/N**. Indicate "Y" Yes if you received a quotation or if you received a response to your solicitation. Indicate "N" No if you received no response to your solicitation from the subcontractor. Must keep records: log, ledger, documentation, etc. that can validate/verify.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Minority and Small Business Development Office at (813) 274-5522.

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 3 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421

Company Name:_____ Address:_____

Federal ID:_____ Phone:_____ Fax:_____ Email:_____

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

[ ] See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)

Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

[ ] No Subcontracting/consulting (of any kind) will be performed on this contract.

[ ] No Firms are listed to be utilized because:_____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=WMBE O =Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %

Failure to Complete, Sign and Submit this form with your Bid or Proposal Shall render the Bid Non-Responsive. (Do Not Modify This Form)

Total ALL Subcontract / Supplier Utilization $_____

Total SLBE Utilization $ _____

Total WMBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. _____% Percent WMBE Utilization of Total Bid/Proposal Amt. _____%

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed:_____ Name/Title:_____ Date:_____

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

MBD 20 rev./effective 02/2016

Page 4 of 4 DMI – Solicited/Utilized

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) to be Utilized Form

(Form MBD-20)

This form must be submitted with all bids or proposals. All subcontractors (regardless of ownership or size) projected to be utilized must be included on this form. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

Contract No. This is the number assigned by the City of Tampa for the bid or proposal.

- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Subcontracting/consulting (of any kind) will be performed on this contract.** Checking box indicates your business will not use subcontractors when no Subcontract Goal or Participation Plan Requirement was set by the City, but will self-perform all work. When subcontractors are utilized during the performance of the contract, the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: certified SLBE or WMBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors, including completion and submitting Form-10 and Form-20.
- **No Firms listed To-Be-Utilized.** Check box; provide brief explanation why no firms were retained when a goal or participation plan requirement was set on the contract. Note: mandatory compliance with Good Faith Effort outreach (GFECP) requirements applies (MBD Form-50) and supporting documentation must accompany the bid.
- **See attached documents.** Check box, if after completing the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the scope/value/percent utilization of subcontractors. Reproduce copies of MBD-20 and attach. All data not submitted on duplicate forms must be in the same format and content as specified in these instructions.

The following instructions are for information of Any and All subcontractors To Be Utilized.

- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **"S" = SLBE, "W" = WMBE.** Enter "**S**" for firms Certified by the City as Small Local Business Enterprises and/or "**W**" for firms Certified by the City as Women/Minority Business Enterprise; **"O" = Non-certified others**.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials (NIGP code if Known)** Indicate the trade, service, or material provided by the subcontractor. Abbreviated list of NIGP is available at http:/www.tampagov.net/mbd "Information Resources".
- **Amount of Quote, Letters of Intent** (required for both SLBEs and WMBEs).
- **Percent of Work/Contract.** Indicate the percent of the total contract price the subcontract(s) represent. For CCNA only (i.e. Consultant A/E Services) you must indicate subcontracts as percent of total scope/contract.
- **Total Subcontract/Supplier Utilization.** – Provide total dollar amount of all subcontractors/suppliers projected to be used for the contract. (Dollar amounts may be optional in CCNA depending on solicitation format).
- **Total SLBE Utilization.** Provide total dollar amount for all projected SLBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Total WMBE Utilization.** Provide total dollar amount for all projected WMBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Percent SLBE Utilization.** Total amount allocated to SLBEs divided by the total bid/proposal amount.
- **Percent WMBE Utilization.** Total amount allocated to WMBEs divided by the total bid/proposal amount.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Minority and Small Business Development Office at (813) 274-5522.

City of Tampa – DMI Sub-(Contractors/Consultants/Suppliers) Payments [ ] Partial [ ] Final

Contract No.: 21-C-00417 WO#,(if any)_____ Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421
Contractor Name: _____ Address _____
Federal ID _____ Phone _____ Fax _____ Email _____
GC Pay Period _____ Payment Request/Invoice Number:_____ City Department: _____
Total Amount Requested for pay period:_____ Total Contract Amount(including change orders):_____

-Type of Ownership - (F=Female M=Male), BF BM = African Am., HF HM = Hispanic Am., AF AM = Asian Am., NF NM = Native Am., CF CM = Caucasian S = SLBE

Type Trade/Work Activity []Sub []Supplier Federal ID	Company Name Address Phone & Fax	Total Sub Contract Or PO Amount	Amount Paid To Date Amount Pending Previously Reported	Amount To Be Paid For This Period Sub Pay Period Ending Date
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$

Certification: I hereby certify that the above information is a true and accurate account of payments to sub – contractors/consultants on this contract.

Signed _____ Name/Title _____ Date: _____

(Modifying This Form or Failure to Complete and Sign May Result in Non-Compliance)

DMI form 30 (rev. 03/12/10) Pg __ of __ [ ] See attached for additional information.

Instructions for completing The DMI Sub-(Contractors/Consultants/ Suppliers) Payment Form (Form MBD-30)

This form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the pay period. If applicable, after payment has been made to the subcontractor, "Waiver and Release of Lien upon Progress Payment", "Affidavit of Contractor in Connection with Final Payment", or an affidavit of payment must be submitted with the amount paid for the pay period. The following will detail what data is required for this form. The instructions that directly follow are for the form heading information pertaining to the project and prime. **(Modifying or omitted information from this form my result in non-compliance.)**

Contract No. This is the number assigned by the City of Tampa for the bid or proposal
W.O.# If the report covers a work order number (W.O.#) for the contract, please indicate it in that space.
Contract Name. This is the name of the contract assigned by the City of Tampa for the bid or proposal.
Contractor Name. The name of your business.
Address. The physical address of your business.
Federal ID. A number assigned to a business for tax reporting purposes.
Phone. Telephone number to contact business.
Fax. Fax number for business.
Email. Provide email address for electronic correspondence.
Pay Period. Provide start and finish dates for pay period. (e.g. 05/01/07 – 05/31/07)
Payment Request/Invoice Number. Provide sequence number for payment requests. (ex. Payment one, write 1 in space, payment three, write 3 in space provided.)
City Department. The City of Tampa department to which the contract pertains.
Total Amount Requested for pay period. Provide all dollars you are expecting to receive for the pay period.
Total Contract Amount (including change orders). Provide expected total contract amount. This includes any change orders that may increase or decrease the original contract amount.
Signed/Name/Title/Date. This is your certification that the information provided on the form is accurate.
See attached documents. Check if you have provided any additional documentation relating to the payment data. Located at the bottom middle of the form.
Partial Payment. Check if the payment period is a partial payment, not a final payment. Located at the top right of the form.
Final Payment. Check of this period is the final payment period. Located at the top right of the form.

The following instructions are for information of any and all subcontractors used for the pay period.

(Type) of Ownership. Indicate the Ethnicity and Gender of the owner of the subcontracting business or SLBE.
Trade/Work Activity. Indicate the trade, service, or material provided by the subcontractor.
SubContractor/SubConsultant/Supplier. Please indicate status of firm on this contract.
Federal ID. A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
Company Name, Address, Phone & Fax. Provide company information for verification of payments.
Total Subcontract Amount. Provide total amount of subcontract for subcontractor including change orders.
Amount Paid To Date. Indicate all dollars paid to date for the subcontractor.
Amount Pending, Previously Reported. Indicate any amount previously reported that payments are pending.
Amount To Be Paid for this Period. Provide dollar amount of dollars requested for the pay period.
Sub Pay Period Ending Date. Provide date for which subcontractor invoiced performed work.

Forms must be signed and dated or will be considered incomplete. The company authorized representative must sign and certify the information is true and accurate. Failure to sign this document or return the document unsigned can be cause for determining a company is in non-compliance of Ordinance 2008-89.

If any additional information is required or you have any questions, you may call the Minority Business Development Office at (813) 274-5522.

EXHIBIT 1 - CITY OF TAMPA INSURANCE REQUIREMENTS

Prior to commencing any work or services or taking occupancy under that certain written agreement or award (for purposes of this document, Agreement) between the City of Tampa, Florida (City) and Firm/Awardee/Successful Proposer/Contractor/Consultant/Lessee/non-City party, etc. (for purposes of this document, Firm) to which this document is attached and incorporated as an Exhibit or otherwise, and continuing during the term of said Agreement (or longer if the Agreement and/or this document so requires), Firm shall provide, pay for, and maintain insurance against claims which may arise from or in connection with the performance of the Agreement (including without limitation occupancy and/or use of certain property/premises) by Firm, its agents, representatives, employees, suppliers, subtenants, or subcontractors (which term includes sub-consultants, as applicable) of any tier subject to the terms and conditions of this document. Should at any time Firm not maintain the insurance coverages required, City at its sole option (but without any obligation or waiver of its rights) may terminate the Agreement. All provisions intended to survive or to be performed subsequent to the expiration or termination of the Agreement shall survive, including without limitation Firm's obligation to maintain or renew coverage, provide evidence of coverage and certified copies of policies, etc. upon City's request and/or in response to a potential claim, litigation, etc.

The following coverages are required: ("M" indicates million(s), for example $1M is $1,000,000)

A. **Commercial General Liability (CGL) Insurance** on the most current Insurance Services Office (ISO) Form CG 00 01 or its equivalent on an "occurrence" basis (Modified Occurrence or Claims Made forms are not acceptable without prior written consent of the City). Coverage must be provided to cover liability contemplated by the Agreement including without limitation premises and operations, independent contractors, contractual liability, products and completed operations, property damage, bodily, personal and advertising injury, contractual liability, explosion, collapse, underground coverages, personal injury liability, death, employees-as-insureds. Products and completed operations liability coverage maintained for at least 3 years after completion of work. **Limits shall not be less than $1M per occurrence and $2M general aggregate for Agreements valued at $2M or less; if valued over $2M, a general aggregate limit that equals or exceeds the Agreement's value.** If a general aggregate limit applies, it shall apply separately to the project/location (ISO CG 25 03 or 25 04 or equivalent).

B. **Automobile Liability (AL) Insurance** in accordance with Florida law, as to the ownership, maintenance, and use of all owned, non-owned, leased, or hired vehicles. **AL insurance shall not be less than: (a) $500,000 combined single limit each occurrence bodily injury and property damage for Agreements valued at $100,000 or less or (b) $1M combined single limit each occurrence bodily injury and property damage for Agreements valued over $100,000.** If transportation of hazardous material involved, the MCS-90 endorsement (or equivalent).

C. **Worker's Compensation (WC) & Employer's Liability Insurance** for all employees engaged under the Agreement, Worker's Compensation as required by Florida law. **Employer's Liability with minimum limits of (a) $500,000 bodily injury by accident and each accident, bodily injury by disease policy limit, and bodily injury by disease each employee for Agreements valued at $100,000 and under or (b) $1M bodily injury by accident and each accident, bodily injury by disease policy limit, and bodily injury by disease each for all other Agreements**.

D. **Excess (Umbrella) Liability Insurance** for Agreements valued at $2M or more, at least $4M per occurrence in excess of underlying limits and no more restrictive than underlying coverage for all work performed by Firm. May also compensate for a deficiency in CGL, AL, or WC.

Firm affirmatively states that the insurance requirements as set forth above are of adequate types and amounts of insurance coverage for any type of claim/loss for the proposed work or services.

ACCEPTABILITY OF INSURERS - Insurance is to be placed with insurers admitted in the State of Florida and who have a current A.M. Best rating of no less than **A-:VII** or, if not rated by A.M. Best, as otherwise approved by the City in advance and in writing.

ADDITIONAL INSURED - City, its elected officials, departments, officers, officials, and employees shall be covered as additional insureds on all liability coverage (e.g. CGL, AL, and Excess (Umbrella) Liability) as to liability arising out of work or operations performed by or on behalf of Firm including materials, parts, or equipment furnished in connection with such work or operations and automobiles owned, leased, hired, or borrowed by or on behalf of Firm. Coverage can be provided in the

form of an endorsement to Firm's insurance (at least as broad as ISO Form CG 20 10 11 85 or **both** CG 10 20, CG 20 26, CG 20 33, or CG 20 38 **and** CG 20 37 if later revisions used).

CANCELLATION/NON-RENEWAL – Each insurance policy shall provide that at least 30 days written notice must be given to City of any cancellation, intent to non-renew, or material reduction in coverage (except aggregate liability limits) and at least 10 days' notice for non-payment of premium. Firm shall also have an independent duty to notify City in like manner, within 5 business days of Firm's receipt from its insurer of any notices of same. If any policy's aggregate limit is reduced, Firm shall directly take steps to have it reinstated. Notice and proof of renewal/continued coverage/certifications, etc. shall be sent to the City's notice (or Award contact) address as stated in the Agreement with a copy to the following: ☒ Purchasing Department, 306 E Jackson Street, Tampa, FL 33602
☒ Other: City of Tampa Insurance Compliance c/o Ebix BPO, PO Box 100085- ZS, Duluth, GA 30096

CERTIFICATE OF INSURANCE (COI) AND ENDORSEMENTS – to be provided to City by insurance carrier prior to Firm beginning any work/services or taking occupancy and, if the insurance expires prior to completion of the work or services or Agreement term (as may be extended), a renewal COI at least 30 days before expiration to the above address(es). COIs shall specifically identify the Agreement and its subject (project, lease, etc.), shall be sufficiently comprehensive to insure City (named as additional insured) and Firm and to certify that coverage extends to subcontractors' acts or omissions, and as to permit the City to determine the required coverages are in place without the responsibility of examining individual policies. **Certificate Holder must be The City of Tampa, Florida**.

CLAIMS MADE – If any liability insurance is issued on a claims made form, Firm agrees to maintain such coverage uninterrupted for at least 3 years following completion and acceptance of the work either through purchase of an extended reporting provision or purchase of successive renewals. The Retroactive Date must be shown and be a date not later than the earlier of the Agreement date or the date performance/occupancy began thereunder.

DEDUCTIBLES/ SELF-INSURED RETENTIONS (SIR) – must be disclosed to City and, if over $500,000, approved by the City in advance and in writing, including at City's option being guaranteed, reduced, or eliminated (additionally if a SIR provides a financial guarantee guaranteeing payment of losses and related investigations, claim administration, and defense expenses). Firm shall be fully responsible for any deductible or SIR (without limiting the foregoing a policy with a SIR shall provide or be endorsed to provide that the SIR may be satisfied by either the City or named insured). In the event of loss which would have been covered but for a deductible or SIR, City may withhold from any payment due Firm, under any agreement with the City, an amount equal to same to cover such loss should full recovery not be obtained under the policy.

PERFORMANCE – All insurance policies shall be fully performable in Hillsborough County, Florida (the County), and construed in accordance with Florida law. Further, all insurance policies must expressly state that the insurance company will accept service of process in the County and that the exclusive venue for any action concerning any matter under those policies shall be in the appropriate state court of the County.

PRIMARY POLICIES - Firm's insurance coverage shall be primary insurance coverage at least as broad as ISO CG 20 01 04 13 as to the City, its elected officials, departments, officers, and employees.. Any insurance or self-insurance maintained by the City, its elected officials, departments, officers, and employees shall be excess of the Firm's insurance and shall not contribute with it.

UNAVAILABILITY – To the fullest extent permitted by law, if Firm is out of business or otherwise unavailable at the time a claim is presented to City, Firm hereby assigns to the City all of its right, title and interest (but not any liabilities or obligations) under any applicable policies of insurance.

WAIVER OF SUBROGATION – With regard to any policy of insurance that would pay third party losses, Firm hereby grants City a waiver of any right to subrogation which any insurer of Firm may acquire against the City by virtue of the payment of any loss under such insurance. Firm agrees to obtain any endorsement that may be necessary to affect such waiver, but this provision shall apply to such policies regardless.

REVISED 3/13/2020

	A	B	C
1		**ATTACHMENT B - PRODUCTS LIST**	
2	**PRODUCTS**	**TYPE**	**MANF. NAME**
3	Benches	**PLAYGROUND & FITNESS EQUIPMENT**	
4	Trash Receptacles	650.12, 650.18	Landscape Structures
5	Bike Racks	650.38, 650.54	Gametime
6	Bollards	650.60, 650.72	Kompan
7	Picnic Tables	650.60, 650.72	Berliner Seilfabrik
8	Bike Repair Station		
9	Play Equipment		
10	-Play Structure	**PLAY SURFACING -**	**MANUFACTURER** **D**
11	-Free Standing		GT Impax PIP
12	Safety Surfacing	650.5	Vitriturf PIP
13	-PIP		LS Pebble Flex
14	-Eng. Wood Fiber		Surface America PIP
15	-Play Turf		Fibar
16	Dog Waste Station		KorKat
17	Pavers		Forever Lawn
18	- brick		
19	- concrete		Innovative Sports Surfacing
20	Flexi Pave		
21	Shade Structure		
22	-fabric sails		
23	-hard roof	**SITE FURN:**	
24	Turf Support Mtls.		**MANUFACTURER**
25	Perma Trak		Du Mor
26		Comm Codes	Victor Stanley
27		650.06	Anova Furnishings, Inc.
28		650.1	Landscape Forms
29		650.24	Keystone Ridge Designs, Inc.
30		650.36	Kay Park
31		650.38	Belson Outdoors
32			Wabash Valley
33			The Park Catalog
34		120.27	Wausau Tile
35			Namco DoggyDo Station
36			iron Age Designs
37			Ironsmith, Inc.
38			Dura Art Stone
39			Creative Systems-Landscape Brands
40			Park Warehouse
41			mmcite7 LLC
42			Forms + Surfaces
43			
44		**SHADE STRUCTURES & GAZEBO**	
45			**MANUFACTURERS**

	A	B	C
46			Poligon
47			Shade Systems
48			Appollo Sunguard
49			USA Shade
50			Classic Recreation Systems
51			Tensile Shade Products
52			
53		**MISCELLANEOUS PRODUCTS / MATERIALS**	**D**
54			**MANUFACTURERS**
55			PermaLoc
56			Grass Pave
57			FlexiPave
58			PermaTrak
59			Trex Company, Inc.
60			Geo Block
61			Oldcastle
62			Keystone
63			Pine Hall Brick
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	D	E
1		
2	**DETAILS**	**DISCOUNT %**
3		
4	Play structures & Free Stdg. Pieces	
5	Play structures & Free Stdg. Pieces	
6	Play structures & Free Stdg. Pieces	
7	Play structures & Free Stdg. Pieces	
8		
9		
10	**ETAILS**	
11	Rubber & Engineered wood fiber	
12	Rubber Poured In Place (PIP)	
13	Rubber PIP	
14	Rubber PIP	
15	Eng. Wood Fiber / Rubber PIP	
16	Rubber PIP, Eng. Wood Fiber, Bonded Rubber, Rubber Mulch, Artificial	
17	Artificial Playground Turf	
18		
19	Rubber PIP, Artificial Turf, Court Surface Repair	
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45	**DETAILS**	

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53	**)ETAILS**	
54		
55	Metal edging	
56	Turf support	
57	Alt. tree grate / paving	
58	Boardwalk system	
59	Decking	
60	Turf support	
61	Block walls	
62	Block walls	
63	Brick Pavers	
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BID PROPOSAL TABULATION/CITY OF TAMPA Note: This is a preliminary summary. Information contained in this summary is subject to review. THIS IS NOT AN AWARD	OPENED: May 13, 2021 @ 3:30 PM	BID #/TITLE: 31040621, Parks and Playground Equipment, Surfacing, Installation and Repairs	READ BY: Celeste Gibbons-Peoples
			TABBED BY: Acquanetta Grant
		DATE ADVERTISED:	DEPT: Parks & Recreation

ITEM/ QUANTITY	BIDDER>>> DESCRIPTION	**Top Line Recreation**		**Most Dependable Fountains, Inc.**		**Laubs Drainage and Flexipade**	
		UNIT	TOTAL	UNIT	TOTAL	UNIT	TOTAL
			Bid Received		Bid Received		Bid Received
TOTAL AMOUNT OF BID:							

ITEM/ QUANTITY	DESCRIPTION BIDDER>>>	**BSN Sports**		**Playmore West**		**KOMPAN, Inc.**	
		UNIT	TOTAL	UNIT	TOTAL	UNIT	TOTAL
			Bid Received		Bid Received		Bid Received
TOTAL AMOUNT OF BID:							

ITEM/ QUANTITY	BIDDER>>> DESCRIPTION	**REP Services**		**KorKat, Inc.**		**Keystone Ridge Designs, Inc.**	
		UNIT	TOTAL	UNIT	TOTAL	UNIT	TOTAL
			Bid Received		Bid Received		Bid Received
TOTAL AMOUNT OF BID:							

ITEM/ QUANTITY	BIDDER>>> DESCRIPTION	**Miller Recreation Equipment**		**Southern Recreation**		**Apollo Sunguard**	
		UNIT	TOTAL	UNIT	TOTAL	UNIT	TOTAL
			Bid Received		Bid Received		Bid Received
TOTAL AMOUNT OF BID:							

ITEM/ QUANTITY	DESCRIPTION BIDDER>>>	**Swartz Associates**					
		UNIT	TOTAL	UNIT	TOTAL	UNIT	TOTAL
			Bid Received		$0.00		$0.00
TOTAL AMOUNT OF BID:							

		OPENED: May 13, 2021 @ 3:30 PM **Updated**		BID #/TITLE: 31040621, Parks and Playground Equipment, Surfacing, Installation and Repairs		READ BY: Celeste Gibbons-Peoples	
						TABBED BY: Acquanetta Grant	
				DATE ADVERTISED:		DEPT: Parks & Recreation	
ITEM/ QUANTITY	BIDDER>>> DESCRIPTION	**Top Line Recreation**		**Most Dependable Fountains, Inc.**		**Laubs Drainage and Flexipade**	
		UNIT	TOTAL	UNIT	TOTAL	UNIT	TOTAL
			Bid Received		Bid Received		Bid Received
TOTAL AMOUNT OF BID:							
ITEM/ QUANTITY	DESCRIPTION BIDDER>>>	**BSN Sports**		**Playmore West**		**KOMPAN, Inc.**	
		UNIT	TOTAL	UNIT	TOTAL	UNIT	TOTAL
			Bid Received		Bid Received		Bid Received
TOTAL AMOUNT OF BID:							
ITEM/ QUANTITY	BIDDER>>> DESCRIPTION	**REP Services**		**KorKat, Inc.**		**Keystone Ridge Designs, Inc.**	
		UNIT	TOTAL	UNIT	TOTAL	UNIT	TOTAL
			Bid Received		Bid Received		Bid Received
TOTAL AMOUNT OF BID:							
ITEM/ QUANTITY	BIDDER>>> DESCRIPTION	**Miller Recreation Equipment**		**Southern Recreation**		**Apollo Sunguard**	
		UNIT	TOTAL	UNIT	TOTAL	UNIT	TOTAL
			Bid Received		Bid Received		Bid Received
TOTAL AMOUNT OF BID:							
ITEM/ QUANTITY	DESCRIPTION BIDDER>>>	**Swartz Associates**		**Bliss Products**			
		UNIT	TOTAL	UNIT	TOTAL	UNIT	TOTAL
			Bid Received		Bid Received		$0.00
TOTAL AMOUNT OF BID:							

City of Tampa
Jane Castor, Mayor

Purchasing Department
Gregory K. Spearman, CPPO, NIGP-CPP, Director
306 E. Jackson Street, 2E
Tampa, Florida 33602
Office (813) 274-8351
Fax: (813) 274-8355

NOTICE OF INTENT TO AWARD

DATE: **JULY 19, 2021**

ITB/RFP Title: **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT**

ITB/RFP Number: **31041421**

Please be advised that the City of Tampa, Director of Purchasing, with concurrence of the City of Tampa's (requesting/user department) staff has recommended awarding the above-referenced Bid/RFP to:

ADVANCED RECREATIONAL CONCEPTS
APOLLO SUNGUARD SYSTEMS
BLISS PRODUCTS AND SERVICES, INC.
BSN SPORTS
KEYSTONE RIDGE DESIGNS
KOMPAN, INC.
KORKAT (LANIER PLANS, INC.)
LAUBS DRAINAGE & FLEXI PAVE
MILLER RECREATION
MOST DEPENDABLE FOUNTAINS
PLAYMORE WEST
REP SERVICES
SOUTHERN RECREATION, INC.
SWARTZ ASSOCIATES
TOP LINE RECREATION, INC

This notice is not to be construed as the final award of the solicitation. Final award is subject to review, by the City of Tampa Purchasing Staff, for compliance with purchasing procedures, funding availability, insurance coverage, and legal sufficiency.

A Bidder(s)/Proposer(s) aggrieved by this decision may file a protest not later than 4:30 P.M., five (5) business days from the first posting hereof, pursuant to City of Tampa Code Chapter 2, Article V, Division 3, Section 2-282, Procurement Protest Procedures. Protests not conforming therewith shall not be reviewed.

Gregory K. Spearman, CPPO

Gregory K. Spearman, CPPO, Director of Purchasing

City of Tampa
Jane Castor, Mayor

Purchasing Department
Gregory K. Spearman, CPPO, NIGP-CPP, Director
306 E. Jackson Street, 2E
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KORKAT (LANIER PLANS, INC.)
LAUBS DRAINAGE & FLEXI PAVE
MILLER RECREATION
MOST DEPENDABLE FOUNTAINS
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REP SERVICES
SOUTHERN RECREATION, INC.
SWARTZ ASSOCIATES
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Gregory K. Spearman, CPPO

Gregory K. Spearman, CPPO, Director of Purchasing

City of Tampa
Jane Castor, Mayor

Purchasing Department
DeAnna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E Hanna Avenue
Tampa, Florida 33610

Office (813) 274-8351
Fax: (813) 274-8355

January 2, 2025

To: whom it may concern,

Subject: PARKS SITE FURNISHINGS, PLAYGROUNDS EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT, BID #31041421

Dear Vendor,

We are extending, per section 4.15.1 Supplemental Unilateral Renewal Periods of the contract terms by 90 days while we finalize the last renewal period. The new expiration date is April 12, 2025. We thank you for the services you have provided to the City of Tampa.

If you have any questions, please call Lewina Woodard at (813) 274-8351

Sincerely,

DeAnna Faggart

DeAnna Faggart, NIGP-CPP, CPPO, CPPB

Purchasing Director

Bids

PURCHASING/MTH/CGP/LW

RESOLUTION NO. 2022- 68

A RESOLUTION APPROVING THE BIDS OF KEYSTONE RIDGE DESIGNS, INC., SWARTZ ASSOCIATES, INC., MOST DEPENDABLE FOUNTAINS INC., MILLER RECREATION EQUIPMENT AND DESIGN, INC. AND APOLLO SUNGUARD SYSTEMS, INC. FOR PRODUCTS ONLY; KOMPAN, INC., ADVANCED RECREATIONAL CONCEPTS, LLC, LAUBS DRAINAGE & FLEXI-PAVE, LLC, BLISS PRODUCTS AND SERVICES, INC., TOP LINE RECREATION, INC., LANIER PLANS INC. DBA KORKAT, PLAYMORE WEST, INC. AND REP SERVICES, INC. FOR PRODUCTS AND SERVICES FOR THE FURNISHING OF PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT IN THE ESTIMATED AMOUNT OF $4,500,000 FOR USE BY THE PARKS AND RECREATION DEPARTMENT; AUTHORIZING THE DIRECTOR OF PURCHASING TO PURCHASE SAID PROPERTY, SUPPLIES, MATERIALS OR SERVICES; PROVIDING AN EFFECTIVE DATE.

WHEREAS, the City of Tampa issued an Invitation to Bid No. 31041421 for Parks Site Furnishing, Playground Equipment and Surfacing, and Installation, Repairs and Replacement for use by the Parks and Recreation Department; and

WHEREAS, the City has decided to use multiple Awardees to help produce the lowest net cost.

NOW, THEREFORE,

BE IT RESOLVED BY THE CITY COUNCIL
OF THE CITY OF TAMPA, FLORIDA:

Section 1. That the bids of Keystone Ridge Designs, Inc., Swartz Associates, Inc., Most Dependable Fountains Inc., Miller Recreation Equipment and Design, Inc. and Apollo Sunguard Systems, Inc. for products only; Kompan, Inc., Advanced Recreational Concepts, LLC, Laubs Drainage & Flexi-Pave, LLC, Bliss Products and Services, Inc., Top Line Recreation, Inc., Lanier Plans Inc. dba Korkat, Playmore West, Inc. and Rep Services, Inc. for products and services, for the furnishing of:

Parks Site Furnishing, Playground Equipment and Surfacing, and Installation, Repairs and Replacement
Bid #31041421
Estimated Expenditure: $4,500,000,

such bids are hereby approved; and the Director of Purchasing is hereby authorized to purchase same.

Section 2. That the award period shall be for a three-year period from the effective date of the awarding or approving Resolution, and may be renewed on the same terms and conditions for one additional one-year period.

Section 3. The catalogs for various bidders are on file in the Office of the Purchasing Department of the City of Tampa, are hereby approved in their entirety or in substantially similar form.

Section 4. This will provide $1,500,000 in FY2022, $1,500,000 in FY2023, subject to annual appropriation and $1,500,000 in FY2024, subject to annual appropriation for the furnishing of Parks Site Furnishing, Playground Equipment and Surfacing, and Installation, Repairs and Replacement for use by the Parks and Recreation Department, controlled by requisition.

Section 5. That the proper officers of the City of Tampa are authorized to do all things necessary and proper in order to carry out and make effective the provisions of this Resolution, which shall take effect immediately upon its adoption.

PASSED AND ADOPTED BY THE CITY COUNCIL OF THE CITY OF TAMPA, FLORIDA, ON JAN 13 2022

CHAIR/CHAIR PRO-TEM
TAMPA CITY COUNCIL

ATTEST:

CITY CLERK/~~DEPUTY CITY CLERK~~

APPROVED AS TO FORM
e/s
BY MARCELLA T. HAMILTON
ASSISTANT CITY ATTORNEY

650

City of Tampa
Jane Castor, Mayor

Purchasing Department
Deanna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E. Hanna Ave.
Tampa, Florida 33610
Office: (813) 274-8351
Fax: (813) 274-8355

M E M O R A N D U M

DATE: July 17, 2024

TO: Lisa Grizzle
Parks & Recreation Administrative Manager
Parks and Recreation

FROM: Theresa Samuel, Purchasing Technician

RE: **REQUEST FOR RENEWAL/RE-BID**

The award for **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS ONLY), BID #31041421** provided by **APOLLO SUNGUARD SYSTEMS, INC.** will expire on **JANUARY 12, 2025**. This award has a one-year renewal period. Per the terms of the contract, the vendor is entitled to request a **3.0%** escalation using the Consumer Price Index.

We are requesting information from you as to your needs relative to renewing the award for the above referenced goods. Please indicate your preference with an **(X)**, for one of the options listed below.

_x_ 1. You want to renew with the current vendor(s). ***Please attach to the Request for Renewal/Re-bid form an explanation as to why it is in the best interest of the Department to Re-new rather than Re-bid. Include a statement that the current pricing has been reviewed and remains fair and reasonable. The information that you provide will appear in the background section of the agenda request form that will appear before City Council. Please submit the MBD-30 payment form (if applicable) to this renewal. The MBD-30 form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the evaluation period.***

a._x_ Please complete the attached **Vendor Performance Evaluation** form.

b._____ Please complete the attached **MBD-30 Sub-Contractor Payment** form **(if applicable for this renewal).**

	ESTIMATED EXPENDITURE	**FUND**	**COST CENTER**	**ACCOUNT**
FY_____	Controlled by Requisition			
FY_____				

(If funds are to be split between two fiscal years, please indicate the years and amounts)

____ 2. You do not want to renew with this vendor and would like to Re-bid. **Please provide an explanation:**

_____

_____

____ 3.You do not want to renew or re-bid at this time. (Let contract expire).

Please return this document and the requested information to my office by **July 23, 2024,** in order that we may process your request in a timely manner.

Dept. Contact Name (Printed): Danielle Riffenburg **Signature:** Danielle Riffenburg Digitally signed by Danielle Riffenburg Date: 2024.08.29 15:06:07 -04'00' **Date:** _____

Please fax to 813-274-8355 or email to theresa.samuel@tampagov.net

VENDOR PERFORMANCE EVALUATION

Name of Vendor Reviewed:	APOLLO SUNGUARD SYSTEMS, INC.	
Contract Name & Number:	PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS ONLY), BID #31041421	
Rating Period	**From: 1/13/24**	**To: Present**

	Place an X for your selection	**Excellent**	**Satisfactory**	**Unsatisfactory**
Delivery/Service completed when required:	Delivered/Service as ordered and to spec?		**x**	
	Timeliness of Product/Service		**x**	
	Quality of Product/Service		**x**	
	Delivery of Products/ Complete/ Undamaged?		**x**	

Please Describe Quality of Product or Service: Products are as expected.

Customer Satisfaction	Communication (Phone, E-Mail, or Fax availability)?		**x**	
	Responsiveness and proper follow up regarding any contractual or performance issues?		**x**	
	Product or Services fulfilled/completed		**x**	

Have you discussed issues with vendor? _____ Yes __x___ No

Would you like to request a meeting with Purchasing & Vendor? _____Yes __x___ No

Performance during rating period: No known issues with products or performance.

Customer Service Comments: Customer service is as expected.

Dept. Contact Name (Printed): _Danielle Riffenburg_____ **Signature:** Danielle Riffenburg Digitally signed by Danielle Riffenburg Date: 2024.08.29 15:06:33 -04'00'

Rev: 4/20/11

PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

APOLLO SUNGUARD SYSTEMS, INC.

Parks and Recreation believes it is in the best interest of the City to renew the contract for Bid #31041421 with APOLLO SUNGUARD SYSTEMS, INC. Maintaining the current contract will allow for efficient maintenance and repair of existing and new equipment installed under this contract. The current pricing has been reviewed and remains fair and reasonable.

City of Tampa
Jane Castor, Mayor

Purchasing Department
DeAnna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E Hanna Avenue
Tampa, Florida 33610

Office (813) 274-8351
Fax: (813) 274-8355

September 12, 2024

Danielle Cibello
Apollo Sunguard Systems, Inc.
4487 A Ashton Rd.
Sarasota, FL 34233
danielle@apollosunguard.com

Dear Ms. Cibello:

Your firm has an award with the City of Tampa to provide **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS ONLY), BID #31041421**

This existing award expires on **JANUARY 12, 2025**. Under the provisions of this award, terms and conditions may be renewed if mutually agreeable to both parties for an additional **one-year** period.

If your firm desires to renew the award, please complete and return the following:

- Statement of Intent
- Form MBD10 – "Schedule of All Sub-Contractors/Consultants/Suppliers Solicited"
- Form MBD20 – "Schedule of Sub-Contractors/Consultants/Suppliers to be Utilized"
- Form MBD50 – "Good Faith Effort Compliance Plan (GFECP) Guidelines"
- Form MBD30 – "Sub-Contractors/Consultant/Suppliers Payments"
- Affidavit of Compliance:
    - FS287.138 Compliance with Foreign Countries of Concern
    - FS287.133 Convicted Vendor List (Public Entity Crimes)
    - FS287.135 Prohibition Against Contracting with Scrutinized Companies
    - FS787.06 Prohibition Against Human Trafficking
    - FS448.095 Compliance With E-Verify

If your firm desires to renew the award, please complete and return the above listed documents. The MBD forms should document any subcontractors that are going to be used to provide goods/services for the award's renewal period and/or if any request for payments has been submitted. If payments were not requested or subcontractors were not used, please mark each form accordingly. **All documents must be submitted for the award/contract to be renewed.**

If you do not wish to renew, please indicate so on the attached Statement of Intent.

Sincerely,

Theresa Samuel
Purchasing Technician
(813) 274-8635
theresa.samuel@tampagov.net

STATEMENT OF INTENT

I, Danielle Cibello,

being authorized to contract for Apollo Sunguard Systems, do hereby express the firm's desire to **renew** the above referenced agreement upon the same prices, same terms and conditions. I understand that an extension of the agreement requires the City's approval. This statement represents the above firm's binding approval of an extension of this agreement.

By: Danielle Cibello
Authorized Signature

9/16/24
Date

Danielle Cibello
Type or Print Name Above

Title: V.P. of Sales

Comments:

( ) We do not wish to renew this award. The source for non-renewal is:

By: _____
Authorized Signature

_____
Date

_____
Type or Print Name Above

Title: _____

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-10)

PARKS SITE FURNISHINGS, PLAYGROUND EQUIP AND SURFACING, INSTALL, REPAIRS AND REPLACE (PRODUCTS ONLY)

Contract No.: 21-P-00417 Contract Name: _____

Company Name: Apollo Sunguard Address: 4487 A Ashton Rd, Sarasota, FL 34233

Federal ID: 65-1135651 Phone: 941-925-3000 Fax: 941-925-3001 Email: danielle@apollosunguard.com

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.

- [x] **No Firms were contacted or solicited for this contract.**
- [ ] **No Firms were contacted because:** _____
- [ ] **See attached list of additional Firms solicited and all supplemental information (List must comply to this form)**

Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=W/MBE O = Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N

Failure to Complete, Sign and Submit this form with your Bid or Proposal Shall render the Bid Non-Responsive (Do Not Modify This Form)

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub-contracting opportunities on this contract.

Signed: Danielle Cibello Name/Title: Danielle Cibello, VP Sales Date: 9/16/24

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

Page 2 of 4 – DMI Solicited/Utilized

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) Solicited Form (Form MBD-10)

This form must be submitted with all bids or proposals. All subcontractors (regardless of ownership or size) solicited and subcontractors from whom unsolicited quotations were received must be included on this form. The instructions that follow correspond to the headings on the form required to be completed. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Firms were contacted or solicited for this contract.** Checking the box indicates that a pre-determined Subcontract Goal or Participation Plan Requirement was not set by the City resulting in your business not using subcontractors and will self-perform all work. If during the performance of the contract you employ subcontractors, the City must pre-approve subcontractors. Use of the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: Certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors.
- **No Firms were contacted because.** Provide brief explanation why no firms were contacted or solicited.
- **See attached documents.** Check box, if after you have completed the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the form. All DMI data not submitted on the MBD Form-10 must be in the same format and have all requested data from MBD Form-10 included.

The following instructions are for information of any and all subcontractors solicited.

- **"S" = SLBE, "W" = W/MBE.** Enter "S" for firms Certified by the City as Small Local Business Enterprises and/or **"W"** for firms Certified by the City as either Women/Minority Business Enterprise; **"O" = Non-certified others**.
- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification and payment of the contractor/subcontractor.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials** indicate the trade, service, or materials provided by the subcontractor. NIGP codes aka "National Institute of Governmental Purchasing" are listed at top section of document.
- **Contact Method L=letter, F=fax, E=Email, P=Phone.** Indicate with letter the method(s) of soliciting for bid.
- **Quote or Resp. (response) Rec'd (received) Y/N**. Indicate "Y" Yes if you received a quotation or if you received a response to your solicitation. Indicate "N" No if you received no response to your solicitation from the subcontractor. Must keep records: log, ledger, documentation, etc. that can validate/verify.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

PARKS SITE FURNISHINGS, PLAYGROUND EQUIP AND SURFACING, INSTALL, REPAIRS AND REPLACE (PRODUCTS ONLY)

Contract No.: 21-P-00417 Contract Name: _____

Company Name: Apollo Sunguard Address: 4487 A Aston Rd Sarasota FL 34233

Federal ID: 65-1135651 Phone: 941-925-3000 Fax: 941-925-3001 Email: danielle@apollosunguard.com

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

☑ **See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)**

Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

☐ **No Subcontracting/consulting (of any kind) will be performed on this contract.**

☐ **No Firms are listed to be utilized because:** _____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=W/MBE O =Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %
O	Home Builders, Inc. 337 Sanfurce Ave, North Port, FL 34287 941-626-7002 dragan747@yahoo.com	CM	912	N/A	N/A

Failure to Complete, Sign and Submit this form with your Bid or Proposal Shall render the Bid Non-Responsive. (Do Not Modify This Form)

Total ALL Subcontract / Supplier Utilization $ —

Total SLBE Utilization $ —

Total W/MBE Utilization $ —

Percent SLBE Utilization of Total Bid/Proposal Amt. —**%** **Percent W/MBE Utilization of Total Bid/Proposal Amt.** —**%**

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: Danielle Cibello Name/Title: Danielle Cibello VP Date: 9/16/24

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive Forms must be included with Bid / Proposal

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) to be Utilized Form

(Form MBD-20)

This form must be submitted with all bids or proposals. All subcontractors (regardless of ownership or size) projected to be utilized must be included on this form. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

Contract No. This is the number assigned by the City of Tampa for the bid or proposal.

- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Subcontracting/consulting (of any kind) will be performed on this contract.** Checking box indicates your business will not use subcontractors when no Subcontract Goal or Participation Plan Requirement was set by the City, but will self-perform all work. When subcontractors are utilized during the performance of the contract, the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors, including completion and submitting Form-10 and Form-20.
- **No Firms listed To-Be-Utilized.** Check box; provide brief explanation why no firms were retained when a goal or participation plan requirement was set on the contract. **Note: Mandatory compliance with Good Faith Effort outreach (GFECP) requirements applies (MBD Form-50) and supporting documentation must accompany the bid.**
- **See attached documents.** Check box, if after completing the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the scope/value/percent utilization of subcontractors. Reproduce copies of MBD-20 and attach. All data not submitted on duplicate forms must be in the same format and content as specified in these instructions.

The following instructions are for information of Any and All subcontractors To Be Utilized.

- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **"S" = SLBE, "W" = W/MBE.** Enter "**S**" for firms Certified by the City as Small Local Business Enterprises and/or "**W**" for firms Certified by the City as Women/Minority Business Enterprise; **"O" = Non-certified others**.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials (NIGP code if Known)** Indicate the trade, service, or material provided by the subcontractor. Abbreviated list of NIGP is available at http:/www.tampagov.net/mbd "Information Resources".
- **Amount of Quote, Letters of Intent** (required for both SLBEs and W/MBEs).
- **Percent of Work/Contract.** Indicate the percent of the total contract price the subcontract(s) represent. For CCNA only (i.e. Consultant A/E Services) you must indicate subcontracts as percent of total scope/contract.
- **Total Subcontract/Supplier Utilization.** – Provide total dollar amount of all subcontractors/suppliers projected to be used for the contract. (Dollar amounts may be optional in CCNA depending on solicitation format).
- **Total SLBE Utilization.** Provide total dollar amount for all projected SLBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Total W/MBE Utilization.** Provide total dollar amount for all projected W/MBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Percent SLBE Utilization.** Total amount allocated to SLBEs divided by the total bid/proposal amount.
- **Percent W/MBE Utilization.** Total amount allocated to W/MBEs divided by the total bid/proposal amount.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign, and Submit all Forms 10,20, & 50 SHALL render the Bid or Proposal Non-Responsive

Good Faith Effort Compliance Plan (GFECP) Guidelines

for Women/Minority Business Enterprise\Small Local Business Enterprise ParticipationCity of Tampa - Equal Business Opportunity Program

(Form MBD 50 – See detailed instructions on page 3 of 3)

Contract Name PARKS SITE FURNISHINGS, PLAYGROUND EQUIP AND SURFACING, INSTALL, REPAIRS AND REPLACE (PRODUCTS ONLY) Bid Date 9/16/24

Bidder/Proposer Apollo Sunguard Systems, Inc.

Signature Danielle Ciballo Date 9/16/24

Name Danielle Ciballo Title V.P. of Sales

The Compliance Plan with attachments is a true account of Good Faith Efforts (GFE) made to achieve the participation goals as specified for Women/Minority Business Enterprises & Small Local Business Enterprises (W/MBE & SLBE) on the referenced contract:

☐ W/MBE & SLBE participation Goal is Not Specified for this Solicitation however participation is aspirational and GFECP is required.

☐ W/MBE & SLBE participation Goal is Met or Exceeded (refer to Goal-Set Form MBD-90).

☑ W/MBE & SLBE participation Goal is Not Fully Achieved (refer to Goal-Set Form MBD-90).

For each checkbox above Bidders/Proposers shall submit DMI Forms 10 and 20 which accurately report all subcontractors solicited and all subcontractors to-be-utilized. The following list is an overview of the required baseline GFECP action steps for all bids/proposals. Furthermore, it is understood that these GFECP requirements are weighted in the compliance evaluation based on the veracity and demonstrable degree of documentation provided with the bid/proposal:

(Check applicable boxes below - Must enclose supporting documents accordingly with Qualifying Remarks)

(1) Solicited through reasonable and available means the interest of W/MBE & SLBEs that have the capability to perform the work of the contract. The Bidder or Proposer must solicit this interest within enough time to allow the W/MBE & SLBEs to respond. The Bidder or Proposer must take appropriate steps to follow up initial solicitations with interested W/MBE & SLBEs. ☐ **See DMI report forms for subcontractors solicited.** ☐ **See enclosed supplemental data on solicitation efforts.**

☐ **Qualifying Remarks**

(2) Provided interested W/MBE & SLBEs with adequate, specific scope information about the plans, specifications, and requirements of the contract, including addenda, in a timely manner to assist them in responding to the requested scope identified by bidder/proposer for the solicitation. ☐ **See enclosed actual solicitations used.**
☐ **Qualifying Remarks**

(3) Negotiated in good faith with interested W/MBE & SLBEs that have submitted bids (e.g. adjusted quantities or scale). Documentation of negotiation must include the names, addresses, and telephone numbers of W/MBE & SLBEs that were solicited; the date of each such solicitation; a description of the information provided regarding the plans and specifications for the work selected for subcontracting; and evidence as to why agreements could not be reached with W/MBE & SLBEs to perform the work. Additional costs involved in soliciting and using subcontractors is not a sufficient reason for a bidder/proposer's failure to meet goals or achieve participation, as long as such costs are reasonable. Bidders are not required to accept excessive quotes in order to meet the goal.
☐ **DMI Utilized Forms for sub-(contractor/consultant) reflect genuine negotiations** ☐ **This project is an RFQ/RFP in nature and negotiationsare limited to clarifications of scope/percentages, specifications, qualifications and subs fee schedules.**
☐ **See enclosed documentation.**
☐ **Qualifying Remarks**

(4) Not rejecting W/MBE & SLBEs as being unqualified without justification based on a thorough investigation of their capabilities. The W/MBE & SLBEs standing within its industry, membership in specific groups, organizations / associations and political or social affiliations are not legitimate causes for rejecting or not soliciting bids to meet the goals.
☐ **Not applicable.** ☐ **See attached justification for rejection of a subcontractor's bid or proposal.** ☐ **Qualifying Remarks**

(5) Made scope(s) of work available to W/MBE & SLBE subcontractors and suppliers; and, segmented portions of the work or material consistent with the available W/MBE & SLBE subcontractors and suppliers, to facilitate meeting the goal. ☐ **In addition, Sub-Contractors could bid on their own choice of work or trade without restriction to a pre-determined**

portion. □ **See enclosed comments.**□ **Qualifying Remarks**

(6) Made good faith efforts, despite the ability or desire of Bidder/Proposer to perform the sub-tasks of a contract with its own forces/organization. A Bidder/Proposer who desires to self-perform the sub-tasks of a contract must demonstrate good faith efforts if the goal has not been met. □ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self-performed by the prime.** □ **Qualifying Remarks w/Documents**

(7) Segmented the portions of the work to be performed by W/MBEs & SLBEs in order to increase the likelihood that the goals will be met. This includes, where appropriate, breaking out contract work items into economically feasible units (quantities/scale) to facilitate W/MBE & SLBE participation, even when the Bidder/Proposer might otherwise prefer to perform these work items with its own forces. □ **Sub-Contractors could bid on their own choice of work or trade without restriction to a pre- determined portion.**□ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self- performed by the prime.** □ **See enclosed comments.**□ **Qualifying Remarks**

(8) Made efforts to assist interested W/MBEs & SLBEs in obtaining bonding, lines of credit, or insurance as required by the City or contractor.
□ **See enclosed documentation on initiatives undertaken and methods to accomplish.** □ **Qualifying Remarks**

(9) Made efforts to assist interested W/MBEs & SLBEs in obtaining necessary equipment, supplies, materials, or related assistance or services, including participation in an acceptable mentor-protégé program. □ **See enclosed documentation of initiatives and/or agreements.** □ **Qualifying Remarks**

(10) Effectively used the services of the City and other organizations that provide assistance in the recruitment and placement of W/MBEs & SLBEs.
□ **See enclosed documentation of services engaged.** □ **Overview (attached) of tactical actions and resources employed toward recruitment**

Note: Any unsolicited information in support of your Bid/RFP Compliance must accompany your submittal. □ **Identify Information Submitted**

Participation Plan: Guidance for Complying with Good Faith Efforts Outreach (page 3 of 3)

(1) All firms on the W/MBE & SLBE Goal Setting List must be solicited and documentation provided for email, fax,letters, phone calls, and other methods of outreach/communication with the listed firms. The DMI Solicited and DMI-Utilized forms must be completed for all firms solicited and all firms utilized. Other opportunities for subcontracting should be explored to attain participation. May consult Tampa EBO Office and/or researching the on-line Diversity Management Business System Directory for Tampa certified W/MBE & SLBEfirms.

(2) Solicitation of W/MBE & SLBEs, via written or electronic notification, should provide specific information on the services needed, where plans can be reviewed and assistance offered in obtaining these, if required. Solicitations should be sent a minimum of a week (i.e. 5 city business days or more) before the bid/proposal date. Actual copies of the bidder's solicitation containing their scope-specific instructions should be provided.

(3) With any quotes received, a follow-up should be made when needed to confirm detail scope of work. For anyW/MBE & SLBE low quotes rejected, an explanation shall be provided detailing negotiation efforts.

(4) If a low bid W/MBE & SLBE is rejected or deemed unqualified the contractor must provide an explanation and supporting documentation for this decision.

(5) Prime shall break down portions of work into economical feasible opportunities for subcontracting. The W/MBE & SLBE directory may be useful in identifying additional subcontracting opportunities and certified firms not listed in the "W/MBE & SLBE Goal Setting Firms Contact List."

(6) Contractor shall not preclude W/MBE & SLBEs from bidding on any part of work, even if the Contractor may desire to self-perform aspects of the work.

(7) Contractor shall avoid relying solely on subcontracting those scopes of work where W/MBE & SLBE availabilityis not sufficient to attain pre-determined goals; including RFP/RFQ solicitations, all of which require GFECPcompliance to achieve sub-consultant participation.

(8) In its solicitations, the Bidder should offer assistance to W/MBE & SLBEs in obtaining bonding, insurance, et cetera, if required of subcontractors by the City or Prime Contractor.

(9) In its solicitation, the Bidder should offer assistance in obtaining equipment for a specific job to W/MBE & SLBEs, if needed. This includes mobilization where applicable.

(10) Contractor should use the services offered by such agencies as the Small Business Development Center (SBDC) @ University South Fla.; SBDC @ Hillsborough County Entrepreneur Collaborative Center; Hillsborough NAACP Empowerment Center; Hillsborough County Economic Development Department DM/DWBE/SBE Program and Prospera-Hispanic Business Assoc. to name a few for the recruitment and placement of available WMBEs/SLBEs.

Tampa

Page 1 of 2 –DMI Payment
City of Tampa – DMI Sub-(Contractors/Consultants/Suppliers) Payments
(FORM MBD-30)

[ ] Partial [ ] Final
Contract No.: 21-P-00417 WO#,(if any):_____ Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIP AND SURFACING, INSTALL, REPAIRS AND REPLACE (PRODUCTS ONLY)
Contractor Name: Apollo Sunguard Systems Address: 4487 A Ashton Rd Sarasota FL 34233
Federal ID:_____ Phone: 941-925-3300 Fax: 941-925-3301 Email: danielle@apollosunguard.com
GC Pay Period:_____ Payment Request/Invoice Number:_____ City Department:_____

Total Amount Requested for pay period: $_____ Total Contract Amount (including change orders):$_____
-Type of Ownership - (F=Female M=Male), BF BM = African Am., HF HM = Hispanic Am., AF AM = Asian Am., NF NM = Native Am., CF CM = Caucasian S = SLBE

Type Trade/Work Activity []Sub []Supplier Federal ID	Company Name Address Phone & Fax	Total Sub Contract Or PO Amount	Amount Paid To Date Amount Pending Previously Reported	Amount To Be Paid For This Period Sub Pay Period Ending Date
	N/A		$	$
			$	$
			$	$
			$	$
			$	$
			$	$

(Modifying This Form or Failure to Complete and Sign May Result in Non-Compliance)

Certification: I hereby certify that the above information is a true and accurate account of payments to sub – contractors/consultants on this contract.

Signed: Danielle Cibello Name/Title: Danielle Cibello/VP Sales Date: 9/23/24

Note: Detailed Instructions for completing this form are on the next page

Page 2 of 2 – DMI Payment

Instructions for completing The DMI Sub-(Contractors/Consultants/ Suppliers) Payment Form

(Form MBD-30)

This form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the pay period. **If applicable, after payment has been made to the subcontractor, "Waiver and Release of Lien upon Progress Payment", "Affidavit of Contractor in Connection with Final Payment", or an affidavit of payment must be submitted with the amount paid for the pay period.** The following will detail what data is required for this form. The instructions that follow correspond to the headings on the form required to be completed. **(Modifying or omitted information from this form my result in non-compliance).**

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **W.O.#** If the report covers a work order number (W.O.#) for the contract, please indicate it in that space.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business.
- **Address.** The physical address of your business.
- **Federal ID.** A number assigned to a business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **Pay Period.** Provide start and finish dates for pay period. (e.g. 05/01/13 – 05/31/13)
- **Payment Request/Invoice Number.** Provide sequence number for payment requests. (ex. Payment one, write 1 in space, payment three, write 3 in space provided.)
- **City Department**. The City of Tampa department to which the contract pertains.
- **Total Amount Requested for pay period.** Provide all dollars you are expecting to receive for the pay period.
- **Total Contract Amount (including change orders).** Provide expected total contract amount. This includes any change orders that may increase or decrease the original contract amount.
- **Signed/Name/Title/Date**. This is your certification that the information provided on the form is accurate.
- **See attached documents.** Check if you have provided any additional documentation relating to the payment data. Located at the bottom middle of the form.
- **Partial Payment.** Check if the payment period is a partial payment, not a final payment. Located at the top right of the form.
- **Final Payment.** Check of this period is the final payment period. Located at the top right of the form.

The following instructions are for information of any and all subcontractors used for the pay period.

- **(Type) of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business or SLBE.
- **Trade/Work Activity.** Indicate the trade, service, or material provided by the subcontractor.
- **SubContractor/SubConsultant/Supplier.** Please indicate status of firm on this contract.
- **Federal ID.** A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Total Subcontract Amount.** Provide total amount of subcontract for subcontractor including change orders.
- **Amount Paid To Date.** Indicate all dollars paid to date for the subcontractor.
- **Amount Pending, Previously Reported.** Indicate any amount previously reported that payments are pending.
- **Amount To Be Paid for this Period.** Provide dollar amount of dollars requested for the pay period.
- **Sub Pay Period Ending Date.** Provide date for which subcontractor invoiced performed work.

Forms must be signed and dated or will be considered incomplete. The company authorized representative must sign and certify the information is true and accurate. Failure to sign this document or return the document unsigned can be cause for determining a company is in non-compliance of Ordinance 2008-89.

If any additional information is required or you have any questions, you may call the Office of Equal Business Opportunity at (813) 274-5522.

AFFIDAVIT OF COMPLIANCE WITH FOREIGN COUNTRIES OF CONCERN PURSUANT TO SECTION 287.138, FLORIDA STATUTES, CONVICTED VENDOR LIST (PUBLIC ENTITY CRIME) PURSUANT TO SECTION 287.133, FLORIDA STATUTES, PROHIBITION AGAINST CONTRACTING WITH SCRUTINIZED COMPANIES PURSUANT TO SECTION 287.135, FLORIDA STATUTES, PROHIBITION AGAINST HUMAN TRAFFICKING PURSUANT TO SECTION 787.06, FLORIDA STATUTES, AND COMPLIANCE WITH E-VERIFY PURSUANT TO SECTION 448.095, FLORIDA STATUTES

The undersigned Affiant, on behalf of the Entity listed below ("Entity"), hereby attests under penalty of perjury as follows:

Public Entity Crimes

1. Affiant understands that a "person" or "affiliate" who has been placed on the "convicted vendor list" following a "conviction" for a "public entity crime" (as those terms are defined in Section 287.133, Florida Statutes) for a period of 36 months following the date of being placed on the convicted vendor list, is ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa. Entities placed on either the "discriminatory vendor list" or "antitrust vendor list" are ineligible to transact business with the City of Tampa.
2. Affiant understands and attests that neither Affiant, nor any person or affiliate of the Entity, nor the Entity have been placed on any of the above referenced vendor lists that would render the Entity ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa.

Scrutinized Companies

3. Affiant understands that pursuant to Section 287.135(2)(a), Florida Statutes, the Entity would be ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa if the Entity is on the "Scrutinized Companies that Boycott Israel List" (created pursuant to Section 215.4725, Florida Statutes) or is engaged in a boycott of Israel. If the value of the contract is one million dollars or more if, at the time of bidding on, submitting a proposal or reply for, or entering into or renewing a contract, the Entity:
    a. Is on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, created pursuant to Section 215.473, Florida Statutes; or
    b. Is engaged in business operations in Cuba or Syria.

4. Affiant attests that neither Affiant nor the Entity are on the Scrutinized Companies that Boycott Israel List, Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, nor are we engaged in a boycott of Israel, and understand that any resulting contract may be terminated for a falsification of this Affidavit.

E-Verify

5. Affiant understands and attests that pursuant to Section 448.095(5), Florida Statutes, the Entity must comply with Florida's E-Verify law to enter into a contract with the City of Tampa.
6. The undersigned Entity is registered with and uses the United States Department of Homeland Security's E-Verify system to verify the work authorization status of all new employees.
7. No public employer has terminated a contract with the Entity pursuant to Section 448.095(5), Florida Statutes, within the year immediately preceding the date of contracting or submitting a bid, proposal or replay to contract with the City of Tampa.
8. Entity is currently in compliance and will remain in compliance, for the duration of any contract with

the City of Tampa, with all requirements of Section 448.095(5), Florida Statutes.

9. Affiant understands and attests that, if there is a good faith belief that the Entity has knowingly violated Section 448.09(1), Florida Statutes, there is an obligation on the part of the City of Tampa to terminate a contract pursuant to Section 448.095(5), Florida Statutes.
10. Affiant understands and attests that, if there is a good faith belief that one of Entity's subcontractor(s) has knowingly violated the Section 448.09(1), Florida Statutes, but the Entity has otherwise complied with its obligations thereunder, then the Entity will be required to immediately terminate the contract with the subcontractor in order to continue providing services to the City of Tampa.

Anti-Human Trafficking

11. Affiant hereby understands and attests that the undersigned Entity does not use coercion of labor or services as those terms are defined in section 787.06(13), Florida Statutes.

Compliance with Foreign Countries of Concern

12. Affiant, on behalf of the Entity attest to the following:
    a. Entity is not owned by the government of a foreign country of concern as defined in Section 287.138, Florida Statutes. (Source: § 287.138(2)(a), Florida Statutes.)

    b. The government of a foreign country of concern does not have a controlling interest in Entity. (Source: § 287.138(2)(b), Florida Statutes.)

    c. Entity is not organized under the laws of, and does not have a principal place of business in a foreign country of concern. (Source: § 287.138(2)(c), Florida Statutes.)

The undersigned is authorized to execute this Affidavit on behalf of Entity.

The undersigned further sayeth naught.

Date: 9/16/24

(Affiant) Signed: Danielle Cibello

Entity: Apollo Sunguard Systems

Name: Danielle Cibello

Title: V.P. of Sales

STATE OF Florida
COUNTY OF Sarasota

SWORN to (or affirmed) and subscribed before me, by means of ☑ physical presence or ☐ online notarization, this 16th day of September, 2024, by Danielle Cibello, as V.P. of Sales, who is personally known to me or who has produced _____ as identification.

[AFFIX NOTARY SEAL/STAMP]

CATHY TASSIE
Notary Public - State of Florida
Commission # HH 334459
My Comm. Expires Dec 8, 2026
Bonded through National Notary Assn.

Cathy Tassie
Signature of Notary

Name: Cathy Tassie
(Print or Type Name)

Notary Public: State of Florida
My Commission Expires 12/8/26

#VDT8QQYV0D2EO7v1

City of Tampa
Jane Castor, Mayor

Purchasing Department
Deanna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E. Hanna Ave.
Tampa, Florida 33610
Office: (813) 274-8351
Fax: (813) 274-8355

M E M O R A N D U M

DATE: July 17, 2024

TO: Lisa Grizzle
Parks & Recreation Administrative Manager
Parks and Recreation

FROM: Theresa Samuel, Purchasing Technician

RE: **REQUEST FOR RENEWAL/RE-BID**

The award for **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS ONLY), BID #31041421** provided by **MOST DEPENDABLE FOUNTAINS INC.** will expire on **JANUARY 12, 2025**. This award has a one-year renewal period. Per the terms of the contract, the vendor is entitled to request a **3.0%** escalation using the Consumer Price Index.

We are requesting information from you as to your needs relative to renewing the award for the above referenced goods. Please indicate your preference with an **(X)**, for one of the options listed below.

_x_ 1. You want to renew with the current vendor(s). ***Please attach to the Request for Renewal/Re-bid form an explanation as to why it is in the best interest of the Department to Re-new rather than Re-bid. Include a statement that the current pricing has been reviewed and remains fair and reasonable. The information that you provide will appear in the background section of the agenda request form that will appear before City Council. Please submit the MBD-30 payment form (if applicable) to this renewal. The MBD-30 form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the evaluation period.***

a.__x__ Please complete the attached **Vendor Performance Evaluation** form.

b._____ Please complete the attached **MBD-30 Sub-Contractor Payment** form **(if applicable for this renewal).**

	ESTIMATED EXPENDITURE	FUND	COST CENTER	ACCOUNT
FY_____	Controlled by Requisition			
FY_____				

(If funds are to be split between two fiscal years, please indicate the years and amounts)

____ 2. You do not want to renew with this vendor and would like to Re-bid. **Please provide an explanation:**

_____

_____

____ 3.You do not want to renew or re-bid at this time. (Let contract expire).

Please return this document and the requested information to my office by **July 23, 2024,** in order that we may process your request in a timely manner.

Dept. Contact Name (Printed): _Danielle Riffenburg_____ **Signature:** Danielle Riffenburg Digitally signed by Danielle Riffenburg Date: 2024.08.08 15:16:41 -04'00' **Date:** _____

Please fax to 813-274-8355 or email to theresa.samuel@tampagov.net

VENDOR PERFORMANCE EVALUATION

Name of Vendor Reviewed:	MOST DEPENDABLE FOUNTAINS INC.	
Contract Name & Number:	PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS ONLY), BID #31041421	
Rating Period	**From: 1/13/24**	**To: Present**

	Place an X for your selection	**Excellent**	**Satisfactory**	**Unsatisfactory**
Delivery/Service completed when required:	Delivered/Service as ordered and to spec?		**x**	
	Timeliness of Product/Service		**x**	
	Quality of Product/Service		**x**	
	Delivery of Products/ Complete/ Undamaged?		**x**	

Please Describe Quality of Product or Service: Products have been delivered in a timely manner and continue to be of good quality.

Customer Satisfaction	Communication (Phone, E-Mail, or Fax availability)?		**x**	
	Responsiveness and proper follow up regarding any contractual or performance issues?	**x**		
	Product or Services fulfilled/completed	**x**		

Have you discussed issues with vendor? _____ Yes ___x___ No

Would you like to request a meeting with Purchasing & Vendor? _____Yes ___x___ No

Performance during rating period: No known issues with products or performance.

Customer Service Comments: Vendor has been very responsive and helpful during interactions.

Dept. Contact Name (Printed): _Danielle Riffenburg_____ **Signature:** Danielle Riffenburg Digitally signed by Danielle Riffenburg Date: 2024.08.29 15:17:04 -04'00'

Rev: 4/20/11

PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS ONLY), BID #31041421

MOST DEPENDABLE FOUNTAINS INC.

Parks and Recreation believes it is in the best interest of the City to renew the contract for Bid #31041421 with MOST DEPENDABLE FOUNTAINS, INC. Maintaining the current contract will allow for efficient maintenance and repair of existing and new equipment installed under this contract. The current pricing has been reviewed and remains fair and reasonable.

City of Tampa
Jane Castor, Mayor

Purchasing Department
DeAnna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E Hanna Avenue
Tampa, Florida 33610

Office (813) 274-8351
Fax: (813) 274-8355

September 12, 2024

Sarah McGrery
Most Dependable Fountains Inc.
5705 Commander Dr.
Arlington, TN 38002
sarah@mostdependable.com

Dear Ms. McGrery:

Your firm has an award with the City of Tampa to provide **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS ONLY), BID #31041421**

This existing award expires on **JANUARY 12, 2025**. Under the provisions of this award, terms and conditions may be renewed if mutually agreeable to both parties for an additional **one-year** period.

If your firm desires to renew the award, please complete and return the following:

- Statement of Intent
- Form MBD10 – "Schedule of All Sub-Contractors/Consultants/Suppliers Solicited"
- Form MBD20 – "Schedule of Sub-Contractors/Consultants/Suppliers to be Utilized"
- Form MBD50 – "Good Faith Effort Compliance Plan (GFECP) Guidelines"
- Form MBD30 – "Sub-Contractors/Consultant/Suppliers Payments"
- Affidavit of Compliance:
    - FS287.138 Compliance with Foreign Countries of Concern
    - FS287.133 Convicted Vendor List (Public Entity Crimes)
    - FS287.135 Prohibition Against Contracting with Scrutinized Companies
    - FS787.06 Prohibition Against Human Trafficking
    - FS448.095 Compliance With E-Verify

If your firm desires to renew the award, please complete and return the above listed documents. The MBD forms should document any subcontractors that are going to be used to provide goods/services for the award's renewal period and/or if any request for payments has been submitted. If payments were not requested or subcontractors were not used, please mark each form accordingly. **All documents must be submitted for the award/contract to be renewed.**

If you do not wish to renew, please indicate so on the attached Statement of Intent.

Sincerely,

Theresa Samuel
Purchasing Technician
(813) 274-8635
theresa.samuel@tampagov.net

STATEMENT OF INTENT

I, Sarah McGrory - Harper,

being authorized to contract for Most Dependable Fountains, do hereby express the firm's desire to renew the above referenced agreement upon the same prices, same terms and conditions. I understand that an extension of the agreement requires the City's approval. This statement represents the above firm's binding approval of an extension of this agreement.

By: _____ 9/16/24
Authorized Signature Date

Sarah McGrory - Harper
Type or Print Name Above

Title: HR / national sales

Comments:

( ) We do not wish to renew this award. The source for non-renewal is:

By: _____ _____
Authorized Signature Date

_____
Type or Print Name Above

Title: _____

Page 1 of 4 – DMI Solicited/Utilized Schedules
City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)
(FORM MBD-10)

Contract No.: 21-P-00417 Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIP AND SURFACING, INSTALL, REPAIRS AND REPLACE (PRODUCTS ONLY)

Company Name: MOST DEPENDABLE FOUNTAINS Address: 5705 COMMANDER DR ARLINGTON TN 38002

Federal ID: 62-1360921 Phone: 901-867-0039 Fax: 901-867-4009 Email: SARAH@MOSTDEPENDABLE.COM

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.

- [x] **No Firms were contacted or solicited for this contract.**
- [ ] **No Firms were contacted because:** _____
- [ ] **See attached list of additional Firms solicited and all supplemental information (List must comply to this form)**

Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=W/MBE O = Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N

Failure to Complete, Sign and Submit this form with your Bid or Proposal Shall render the Bid Non-Responsive (Do Not Modify This Form)

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub-contracting opportunities on this contract.

Signed: _____ Name/Title: SARAH MCGRORY- HARPER HR Date: 9/16/2024

Page 2 of 4 – DMI Solicited/Utilized

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) Solicited Form

(Form MBD-10)

This form must be submitted with all bids or proposals. **All** subcontractors (regardless of ownership or size) solicited and subcontractors from whom unsolicited quotations were received must be included on this form. The instructions that follow correspond to the headings on the form required to be completed. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Firms were contacted or solicited for this contract.** Checking the box indicates that a pre-determined Subcontract Goal or Participation Plan Requirement was not set by the City resulting in your business not using subcontractors and will self-perform all work. If during the performance of the contract you employ subcontractors, the City must pre-approve subcontractors. Use of the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: Certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors.
- **No Firms were contacted because.** Provide brief explanation why no firms were contacted or solicited.
- **See attached documents.** Check box, if after you have completed the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the form. All DMI data not submitted on the MBD Form-10 must be in the same format and have all requested data from MBD Form-10 included.

The following instructions are for information of any and all subcontractors solicited.

- **"S" = SLBE, "W" = W/MBE.** Enter "S" for firms Certified by the City as Small Local Business Enterprises and/or "W" for firms Certified by the City as either Women/Minority Business Enterprise; **"O" = Non-certified others.**
- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification and payment of the contractor/subcontractor.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials** indicate the trade, service, or materials provided by the subcontractor. NIGP codes aka "National Institute of Governmental Purchasing" are listed at top section of document.
- **Contact Method L=letter, F=fax, E=Email, P=Phone.** Indicate with letter the method(s) of soliciting for bid.
- **Quote or Resp. (response) Rec'd (received) Y/N**. Indicate "Y" Yes if you received a quotation or if you received a response to your solicitation. Indicate "N" No if you received no response to your solicitation from the subcontractor. Must keep records: log, ledger, documentation, etc. that can validate/verify.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Page 3 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

PARKS SITE FURNISHINGS, PLAYGROUND EQUIP AND SURFACING, INSTALL, REPAIRS AND REPLACE (PRODUCTS ONLY)

Contract No.: 21-P-00417 Contract Name: _____

Company Name: MOST DEPENDABLE FOUNTAINS Address: 5705 COMMANDER DR ARLINGTON TN 38002

Federal ID: 62-1360921 Phone: 901-867-0039 Fax: 901-867-4008 Email: SARAH@MOSTDEPENDABLE.COM

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

☐ **See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)**

Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

☑ **No Subcontracting/consulting (of any kind) will be performed on this contract.**

☐ **No Firms are listed to be utilized because:** _____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=W/MBE O =Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %

Failure to Complete, Sign and Submit this form with your Bid or Proposal Shall render the Bid Non-Responsive. (Do Not Modify This Form)

Total ALL Subcontract / Supplier Utilization $ _____

Total SLBE Utilization $ _____

Total W/MBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. _____**% Percent W/MBE Utilization of Total Bid/Proposal Amt.** _____**%**

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: _____ Name/Title: SARAH MCGRORY-HARPER HR Date: 9/16/2024

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive Forms must be included with Bid / Proposal

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) to be Utilized Form

(Form MBD-20)

This form must be submitted with all bids or proposals. All subcontractors (regardless of ownership or size) projected to be utilized must be included on this form. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

Contract No. This is the number assigned by the City of Tampa for the bid or proposal.

- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Subcontracting/consulting (of any kind) will be performed on this contract.** Checking box indicates your business will not use subcontractors when no Subcontract Goal or Participation Plan Requirement was set by the City, but will self-perform all work. When subcontractors are utilized during the performance of the contract, the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors, including completion and submitting Form-10 and Form-20.
- **No Firms listed To-Be-Utilized.** Check box; provide brief explanation why no firms were retained when a goal or participation plan requirement was set on the contract. **Note: Mandatory compliance with Good Faith Effort outreach (GFECP) requirements applies (MBD Form-50) and supporting documentation must accompany the bid.**
- **See attached documents.** Check box, if after completing the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the scope/value/percent utilization of subcontractors. Reproduce copies of MBD-20 and attach. All data not submitted on duplicate forms must be in the same format and content as specified in these instructions.

The following instructions are for information of Any and All subcontractors To Be Utilized.

- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **"S" = SLBE, "W" = W/MBE.** Enter "**S**" for firms Certified by the City as Small Local Business Enterprises and/or "**W**" for firms Certified by the City as Women/Minority Business Enterprise; **"O" = Non-certified others.**
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials (NIGP code if Known)** Indicate the trade, service, or material provided by the subcontractor. Abbreviated list of NIGP is available at http:/www.tampagov.net/mbd "Information Resources".
- **Amount of Quote, Letters of Intent** (required for both SLBEs and W/MBEs).
- **Percent of Work/Contract.** Indicate the percent of the total contract price the subcontract(s) represent. For CCNA only (i.e. Consultant A/E Services) you must indicate subcontracts as percent of total scope/contract.
- **Total Subcontract/Supplier Utilization.** – Provide total dollar amount of all subcontractors/suppliers projected to be used for the contract. (Dollar amounts may be optional in CCNA depending on solicitation format).
- **Total SLBE Utilization.** Provide total dollar amount for all projected SLBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Total W/MBE Utilization.** Provide total dollar amount for all projected W/MBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Percent SLBE Utilization.** Total amount allocated to SLBEs divided by the total bid/proposal amount.
- **Percent W/MBE Utilization.** Total amount allocated to W/MBEs divided by the total bid/proposal amount.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Good Faith Effort Compliance Plan (GFECP) Guidelines

for Women/Minority Business Enterprise\Small Local Business Enterprise ParticipationCity of Tampa - Equal Business Opportunity Program

(Form MBD 50 – See detailed instructions on page 3 of 3)

Contract Name PARKS SITE FURNISHINGS, PLAYGROUND EQUIP AND SURFACING, INSTALL, REPAIRS AND REPLACE (PRODUCTS ONLY) **Bid Date** 9/16/2024

Bidder/Proposer MOST DEPENDABLE FOUNTAINS

Signature _____ **Date** 9/16/2024

Name SARAH MCGRORY-HARPER **Title** HR/ NATIONAL SALES REPRESENTATIVE

The Compliance Plan with attachments is a true account of Good Faith Efforts (GFE) made to achieve the participation goals as specified for Women/Minority Business Enterprises & Small Local Business Enterprises (W/MBE & SLBE) on the referenced contract:

☐ **W/MBE & SLBE participation** Goal is Not Specified for this Solicitation **however participation is aspirational and GFECP is required.**

☐ **W/MBE & SLBE participation** Goal is Met or Exceeded **(refer to Goal-Set Form MBD-90).**

☐ **W/MBE & SLBE participation Goal is** Not Fully Achieved **(refer to Goal-Set Form MBD-90).**

For each checkbox above Bidders/Proposers shall submit DMI Forms 10 and 20 which accurately report all subcontractors solicited and all subcontractors to-be-utilized. The following list is an overview of the required baseline GFECP action steps for all bids/proposals. Furthermore, it is understood that these GFECP requirements are weighted in the compliance evaluation based on the veracity and demonstrable degree of documentation provided with the bid/proposal:

(Check applicable boxes below - Must enclose supporting documents accordingly with Qualifying Remarks)

(1) Solicited through reasonable and available means the interest of W/MBE & SLBEs that have the capability to perform the work of the contract. The Bidder or Proposer must solicit this interest within enough time to allow the W/MBE & SLBEs to respond. The Bidder or Proposer must take appropriate steps to follow up initial solicitations with interested W/MBE & SLBEs. ☐ **See DMI report forms for subcontractors solicited.** ☐ **See enclosed supplemental data on solicitation efforts.**

☐ **Qualifying Remarks**

(2) Provided interested W/MBE & SLBEs with adequate, specific scope information about the plans, specifications, and requirements of the contract, including addenda, in a timely manner to assist them in responding to the requested scope identified by bidder/proposer for the solicitation. ☐ **See enclosed actual solicitations used.**
☐ **Qualifying Remarks**

(3) Negotiated in good faith with interested W/MBE & SLBEs that have submitted bids (e.g. adjusted quantities or scale). Documentation of negotiation must include the names, addresses, and telephone numbers of W/MBE & SLBEs that were solicited; the date of each such solicitation; a description of the information provided regarding the plans and specifications for the work selected for subcontracting; and evidence as to why agreements could not be reached with W/MBE & SLBEs to perform the work. Additional costs involved in soliciting and using subcontractors is not a sufficient reason for a bidder/proposer's failure to meet goals or achieve participation, as long as such costs are reasonable. Bidders are not required to accept excessive quotes in order to meet the goal.
☐ **DMI Utilized Forms for sub-(contractor/consultant) reflect genuine negotiations** ☐ **This project is an RFQ/RFP in nature and negotiationsare limited to clarifications of scope/percentages, specifications, qualifications and subs fee schedules.**
☐ **See enclosed documentation.**
☐ **Qualifying Remarks**

(4) Not rejecting W/MBE & SLBEs as being unqualified without justification based on a thorough investigation of their capabilities. The W/MBE & SLBEs standing within its industry, membership in specific groups, organizations / associations and political or social affiliations are not legitimate causes for rejecting or not soliciting bids to meet the goals.
☐ **Not applicable.** ☐ **See attached justification for rejection of a subcontractor's bid or proposal.** ☐ **Qualifying Remarks**

(5) Made scope(s) of work available to W/MBE & SLBE subcontractors and suppliers; and, segmented portions of the work or material consistent with the available W/MBE & SLBE subcontractors and suppliers, to facilitate meeting the goal. ☐ **In addition, Sub-Contractors could bid on their own choice of work or trade without restriction to a pre-determined**

portion. □ **See enclosed comments.**□ **Qualifying Remarks**

(6) Made good faith efforts, despite the ability or desire of Bidder/Proposer to perform the sub-tasks of a contract with its own forces/organization. A Bidder/Proposer who desires to self-perform the sub-tasks of a contract must demonstrate good faith efforts if the goal has not been met. □ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self-performed by the prime.** □ **Qualifying Remarks w/Documents**

(7) Segmented the portions of the work to be performed by W/MBEs & SLBEs in order to increase the likelihood that the goals will be met. This includes, where appropriate, breaking out contract work items into economically feasible units (quantities/scale) to facilitate W/MBE & SLBE participation, even when the Bidder/Proposer might otherwise prefer to perform these work items with its own forces. □ **Sub-Contractors could bid on their own choice of work or trade without restriction to a pre- determined portion.**□ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self- performed by the prime.** □ **See enclosed comments.**□ **Qualifying Remarks**

(8) Made efforts to assist interested W/MBEs & SLBEs in obtaining bonding, lines of credit, or insurance as required by the City or contractor.
□ **See enclosed documentation on initiatives undertaken and methods to accomplish.** □ **Qualifying Remarks**

(9) Made efforts to assist interested W/MBEs & SLBEs in obtaining necessary equipment, supplies, materials, or related assistance or services, including participation in an acceptable mentor-protégé program. □ **See enclosed documentation of initiatives and/or agreements.** □ **Qualifying Remarks**

(10) Effectively used the services of the City and other organizations that provide assistance in the recruitment and placement of W/MBEs & SLBEs.
□ **See enclosed documentation of services engaged.** □ **Overview (attached) of tactical actions and resources employed toward recruitment**

Note: Any unsolicited information in support of your Bid/RFP Compliance must accompany your submittal. □ **Identify Information Submitted**

Participation Plan: Guidance for Complying with Good Faith Efforts Outreach (page 3 of 3)

(1) All firms on the W/MBE & SLBE Goal Setting List must be solicited and documentation provided for email, fax,letters, phone calls, and other methods of outreach/communication with the listed firms. The DMI Solicited and DMI-Utilized forms must be completed for all firms solicited and all firms utilized. Other opportunities for subcontracting should be explored to attain participation. May consult Tampa EBO Office and/or researching the on-line Diversity Management Business System Directory for Tampa certified W/MBE & SLBEfirms.

(2) Solicitation of W/MBE & SLBEs, via written or electronic notification, should provide specific information on the services needed, where plans can be reviewed and assistance offered in obtaining these, if required. Solicitations should be sent a minimum of a week (i.e. 5 city business days or more) before the bid/proposal date. Actual copies of the bidder's solicitation containing their scope-specific instructions should be provided.

(3) With any quotes received, a follow-up should be made when needed to confirm detail scope of work. For anyW/MBE & SLBE low quotes rejected, an explanation shall be provided detailing negotiation efforts.

(4) If a low bid W/MBE & SLBE is rejected or deemed unqualified the contractor must provide an explanation and supporting documentation for this decision.

(5) Prime shall break down portions of work into economical feasible opportunities for subcontracting. The W/MBE & SLBE directory may be useful in identifying additional subcontracting opportunities and certified firms not listed in the "W/MBE & SLBE Goal Setting Firms Contact List."

(6) Contractor shall not preclude W/MBE & SLBEs from bidding on any part of work, even if the Contractor may desire to self-perform aspects of the work.

(7) Contractor shall avoid relying solely on subcontracting those scopes of work where W/MBE & SLBE availabilityis not sufficient to attain pre-determined goals; including RFP/RFQ solicitations, all of which require GFECPcompliance to achieve sub-consultant participation.

(8) In its solicitations, the Bidder should offer assistance to W/MBE & SLBEs in obtaining bonding, insurance, et cetera, if required of subcontractors by the City or Prime Contractor.

(9) In its solicitation, the Bidder should offer assistance in obtaining equipment for a specific job to W/MBE & SLBEs, if needed. This includes mobilization where applicable.

(10) Contractor should use the services offered by such agencies as the Small Business Development Center (SBDC) @ University South Fla.; SBDC @ Hillsborough County Entrepreneur Collaborative Center; Hillsborough NAACP Empowerment Center; Hillsborough County Economic Development Department DM/DWBE/SBE Program and Prospera-Hispanic Business Assoc. to name a few for the recruitment and placement of available WMBEs/SLBEs.

City of Tampa – DMI Sub-(Contractors/Consultants/Suppliers) Payments

(FORM MBD-30)

[ ] Partial [ ] Final

Contract No.: 21-P-00417 WO#,(if any): _____ Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIP AND SURFACING, INSTALL, REPAIRS AND REPLACE (PRODUCTS ONLY)

Contractor Name: MOST DEPENDABLE FOUNTAINS Address: 5705 COMMANDER DR ARLINGTON TN 38002

Federal ID: 62-1360921 Phone: 901-867-0039 Fax: 901-867-4009 Email: SARAH@MOSTDEPENDABLE.COM

GC Pay Period: NET 30 Payment Request/Invoice Number: _____ City Department: _____

Total Amount Requested for pay period: $_____ Total Contract Amount (including change orders):$_____

-Type of Ownership - (F=Female M=Male), BF BM = African Am., HF HM = Hispanic Am., AF AM = Asian Am., NF NM = Native Am., CF CM = Caucasian S = SLBE

Type Trade/Work Activity []Sub []Supplier Federal ID	Company Name Address Phone & Fax	Total Sub Contract Or PO Amount	Amount Paid To Date Amount Pending Previously Reported	Amount To Be Paid For This Period Sub Pay Period Ending Date
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$

(Modifying This Form or Failure to Complete and Sign May Result in Non-Compliance)

Certification: I hereby certify that the above information is a true and accurate account of payments to sub – contractors/consultants on this contract.

Signed: _____ Name/Title: SARAH MCGRORY- HARPER HR Date: 9/16/2024

DMI form 30 (rev. 01/15/2024)

Note: Detailed Instructions for completing this form are on the next page

Tampa

Page 2 of 2 – DMI Payment

Instructions for completing The DMI Sub-(Contractors/Consultants/ Suppliers) Payment Form (Form MBD-30)

This form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the pay period. If applicable, after payment has been made to the subcontractor, "Waiver and Release of Lien upon Progress Payment", "Affidavit of Contractor in Connection with Final Payment", or an affidavit of payment must be submitted with the amount paid for the pay period. The following will detail what data is required for this form. The instructions that follow correspond to the headings on the form required to be completed. **(Modifying or omitted information from this form my result in non-compliance).**

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **W.O.#** If the report covers a work order number (W.O.#) for the contract, please indicate it in that space.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business.
- **Address.** The physical address of your business.
- **Federal ID.** A number assigned to a business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **Pay Period.** Provide start and finish dates for pay period. (e.g. 05/01/13 – 05/31/13)
- **Payment Request/Invoice Number.** Provide sequence number for payment requests. (ex. Payment one, write 1 in space, payment three, write 3 in space provided.)
- **City Department**. The City of Tampa department to which the contract pertains.
- **Total Amount Requested for pay period.** Provide all dollars you are expecting to receive for the pay period.
- **Total Contract Amount (including change orders).** Provide expected total contract amount. This includes any change orders that may increase or decrease the original contract amount.
- **Signed/Name/Title/Date**. This is your certification that the information provided on the form is accurate.
- **See attached documents.** Check if you have provided any additional documentation relating to the payment data. Located at the bottom middle of the form.
- **Partial Payment.** Check if the payment period is a partial payment, not a final payment. Located at the top right of the form.
- **Final Payment.** Check of this period is the final payment period. Located at the top right of the form.

The following instructions are for information of any and all subcontractors used for the pay period.

- **(Type) of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business or SLBE.
- **Trade/Work Activity.** Indicate the trade, service, or material provided by the subcontractor.
- **SubContractor/SubConsultant/Supplier.** Please indicate status of firm on this contract.
- **Federal ID.** A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Total Subcontract Amount.** Provide total amount of subcontract for subcontractor including change orders.
- **Amount Paid To Date.** Indicate all dollars paid to date for the subcontractor.
- **Amount Pending, Previously Reported.** Indicate any amount previously reported that payments are pending.
- **Amount To Be Paid for this Period.** Provide dollar amount of dollars requested for the pay period.
- **Sub Pay Period Ending Date.** Provide date for which subcontractor invoiced performed work.

Forms must be signed and dated or will be considered incomplete. The company authorized representative must sign and certify the information is true and accurate. Failure to sign this document or return the document unsigned can be cause for determining a company is in non-compliance of Ordinance 2008-89.

If any additional information is required or you have any questions, you may call the Office of Equal Business Opportunity at (813) 274-5522.

AFFIDAVIT OF COMPLIANCE WITH FOREIGN COUNTRIES OF CONCERN PURSUANT TO SECTION 287.138, FLORIDA STATUTES, CONVICTED VENDOR LIST (PUBLIC ENTITY CRIME) PURSUANT TO SECTION 287.133, FLORIDA STATUTES, PROHIBITION AGAINST CONTRACTING WITH SCRUTINIZED COMPANIES PURSUANT TO SECTION 287.135, FLORIDA STATUTES, PROHIBITION AGAINST HUMAN TRAFFICKING PURSUANT TO SECTION 787.06, FLORIDA STATUTES, AND COMPLIANCE WITH E-VERIFY PURSUANT TO SECTION 448.095, FLORIDA STATUTES

The undersigned Affiant, on behalf of the Entity listed below ("Entity"), hereby attests under penalty of perjury as follows:

Public Entity Crimes

1. Affiant understands that a "person" or "affiliate" who has been placed on the "convicted vendor list" following a "conviction" for a "public entity crime" (as those terms are defined in Section 287.133, Florida Statutes) for a period of 36 months following the date of being placed on the convicted vendor list, is ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa. Entities placed on either the "discriminatory vendor list" or "antitrust vendor list" are ineligible to transact business with the City of Tampa.
2. Affiant understands and attests that neither Affiant, nor any person or affiliate of the Entity, nor the Entity have been placed on any of the above referenced vendor lists that would render the Entity ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa.

Scrutinized Companies

3. Affiant understands that pursuant to Section 287.135(2)(a), Florida Statutes, the Entity would be ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa if the Entity is on the "Scrutinized Companies that Boycott Israel List" (created pursuant to Section 215.4725, Florida Statutes) or is engaged in a boycott of Israel. If the value of the contract is one million dollars or more if, at the time of bidding on, submitting a proposal or reply for, or entering into or renewing a contract, the Entity:
    a. Is on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, created pursuant to Section 215.473, Florida Statutes; or
    b. Is engaged in business operations in Cuba or Syria.

4. Affiant attests that neither Affiant nor the Entity are on the Scrutinized Companies that Boycott Israel List, Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, nor are we engaged in a boycott of Israel, and understand that any resulting contract may be terminated for a falsification of this Affidavit.

E-Verify

5. Affiant understands and attests that pursuant to Section 448.095(5), Florida Statutes, the Entity must comply with Florida's E-Verify law to enter into a contract with the City of Tampa.
6. The undersigned Entity is registered with and uses the United States Department of Homeland Security's E-Verify system to verify the work authorization status of all new employees.
7. No public employer has terminated a contract with the Entity pursuant to Section 448.095(5), Florida Statutes, within the year immediately preceding the date of contracting or submitting a bid, proposal or replay to contract with the City of Tampa.
8. Entity is currently in compliance and will remain in compliance, for the duration of any contract with

the City of Tampa, with all requirements of Section 448.095(5), Florida Statutes.

9. Affiant understands and attests that, if there is a good faith belief that the Entity has knowingly violated Section 448.09(1), Florida Statutes, there is an obligation on the part of the City of Tampa to terminate a contract pursuant to Section 448.095(5), Florida Statutes.
10. Affiant understands and attests that, if there is a good faith belief that one of Entity's subcontractor(s) has knowingly violated the Section 448.09(1), Florida Statutes, but the Entity has otherwise complied with its obligations thereunder, then the Entity will be required to immediately terminate the contract with the subcontractor in order to continue providing services to the City of Tampa.

Anti-Human Trafficking

11. Affiant hereby understands and attests that the undersigned Entity does not use coercion of labor or services as those terms are defined in section 787.06(13), Florida Statutes.

Compliance with Foreign Countries of Concern

12. Affiant, on behalf of the Entity attest to the following:
    a. Entity is not owned by the government of a foreign country of concern as defined in Section 287.138, Florida Statutes. (Source: § 287.138(2)(a), Florida Statutes.)

    b. The government of a foreign country of concern does not have a controlling interest in Entity. (Source: § 287.138(2)(b), Florida Statutes.)

    c. Entity is not organized under the laws of, and does not have a principal place of business in a foreign country of concern. (Source: § 287.138(2)(c), Florida Statutes.)

The undersigned is authorized to execute this Affidavit on behalf of Entity.

The undersigned further sayeth naught.

Date: 9-16-24 (Affiant) Signed: _____

Entity: Most Dependable Fountains Name: Sarah McGrory Harper

Title: National Sales Mgr

STATE OF TN
COUNTY OF Shelby

SWORN to (or affirmed) and subscribed before me, by means of ☑ physical presence or ☐ online notarization, this 16th day of September, 2024 by Sarah McGrory-Harper as _____, who is personally known to me or who has produced _____ as identification.

[AFFIX NOTARY SEAL/STAMP]

EDYE ODOM
STATE OF TENNESSEE NOTARY PUBLIC
SHELBY COUNTY
MY COMMISSION EXPIRES 7-14-2026

_____
Signature of Notary

Name: Edye Odom
(Print or Type Name)

Notary Public: State of Florida
My Commission Expires 7-14-2026

#VDT8QQYV0D2EO7v1

Form **W-9**
(Rev. March 2024)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

Give form to the requester. Do not send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See *Specific Instructions* on page 3.

1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)

MOST DEPENDABLE FOUNTAINS, INC.

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

3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor ☑ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate

☐ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) . . . . .

Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead 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 Foreign Account Tax Compliance Act (FATCA) reporting code (if any)

(Applies to accounts maintained outside the United States.)

3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions . . . . . ☐

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

5705 COMMANDER DRIVE

Requester's name and address (optional)

6 City, state, and ZIP code

ARLINGTON, TN 38002

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

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

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

Social security number

			–			–				

or

Employer identification number

6	2	–	1	3	6	0	9	2	1

Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. 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 Amanda Baker Date 1-8-25

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*.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

From: Mailroom
To: Theresa Samuel
Subject: [EXTERNAL] Most Dependable Fountains W-9
Date: Tuesday, February 11, 2025 12:01:34 PM
Attachments: W-9 2025.pdf

Good morning Theresa,

Attached is our W-9.
Please let me know if you need anything else.

Sincerely,

Amanda Baker
Receptionist
Most Dependable Fountains, Inc.

901-867-0039
mailroom@mostdependable.com
www.mostdependable.com
5705 Commander Dr., Arlington, TN 38002

MOST DEPENDABLE FOUNTAINS, INC.

IMPORTANT NOTICE: Never trust wiring instructions sent via email. Cyber criminals are hacking email accounts and sending emails with fake wiring instructions. These emails are convincing and sophisticated. Always independently confirm wiring instructions in person or via a telephone call to a trusted and verified phone number.

City of Tampa
Jane Castor, Mayor

Purchasing Department
Deanna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E. Hanna Ave.
Tampa, Florida 33610
Office: (813) 274-8351
Fax: (813) 274-8355

M E M O R A N D U M

DATE: July 17, 2024

TO: Lisa Grizzle
Parks & Recreation Administrative Manager
Parks and Recreation

FROM: Theresa Samuel, Purchasing Technician

RE: **REQUEST FOR RENEWAL/RE-BID**

The award for **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS ONLY), BID #31041421** provided by **MILLER RECREATION EQUIPMENT AND DESIGN, INC.** will expire on **JANUARY 12, 2025**. This award has a one-year renewal period. Per the terms of the contract, the vendor is entitled to request a **3.0%** escalation using the Consumer Price Index.

We are requesting information from you as to your needs relative to renewing the award for the above referenced goods. Please indicate your preference with an **(X)**, for one of the options listed below.

__x__ 1. You want to renew with the current vendor(s). ***Please attach to the Request for Renewal/Re-bid form an explanation as to why it is in the best interest of the Department to Re-new rather than Re-bid. Include a statement that the current pricing has been reviewed and remains fair and reasonable. The information that you provide will appear in the background section of the agenda request form that will appear before City Council. Please submit the MBD-30 payment form (if applicable) to this renewal. The MBD-30 form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the evaluation period.***

a.__x__ Please complete the attached **Vendor Performance Evaluation** form.

b._____ Please complete the attached **MBD-30 Sub-Contractor Payment** form **(if applicable for this renewal).**

	ESTIMATED EXPENDITURE	FUND	COST CENTER	ACCOUNT
FY_____	Controlled by Requisition			
FY_____				

(If funds are to be split between two fiscal years, please indicate the years and amounts)

____ 2. You do not want to renew with this vendor and would like to Re-bid. **Please provide an explanation:**

_____

_____

____ 3.You do not want to renew or re-bid at this time. (Let contract expire).

Please return this document and the requested information to my office by **July 23, 2024,** in order that we may process your request in a timely manner.

Dept. Contact Name (Printed): _Danielle Riffenburg_ **Signature:** Danielle Riffenburg Digitally signed by Danielle Riffenburg Date: 2024.08.15 21:03 -04'00' **Date:** _____

Please fax to 813-274-8355 or email to theresa.samuel@tampagov.net

VENDOR PERFORMANCE EVALUATION

Name of Vendor Reviewed:	MILLER RECREATION EQUIPMENT AND DESIGN, INC.	
Contract Name & Number:	PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS ONLY), BID #31041421	
Rating Period	**From: 1/13/24**	**To: Present**

	Place an X for your selection	**Excellent**	**Satisfactory**	**Unsatisfactory**
Delivery/Service completed when required:	Delivered/Service as ordered and to spec?		**x**	
	Timeliness of Product/Service		**x**	
	Quality of Product/Service		**x**	
	Delivery of Products/ Complete/ Undamaged?		**x**	

Please Describe Quality of Product or Service: Products are delivered as described.

Customer Satisfaction	Communication (Phone, E-Mail, or Fax availability)?		**x**	
	Responsiveness and proper follow up regarding any contractual or performance issues?		**x**	
	Product or Services fulfilled/completed		**x**	

Have you discussed issues with vendor? _____ Yes ___x___ No

Would you like to request a meeting with Purchasing & Vendor? _____Yes ___x___ No

Performance during rating period: No known issues with products or performance.

Customer Service Comments: Customer service is as expected.

Dept. Contact Name (Printed): Danielle Riffenburg **Signature:** Danielle Riffenburg Digitally signed by Danielle Riffenburg Date: 2024.08.29 15:21:26 -04'00'

Rev: 4/20/11

PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS ONLY), BID #31041421

MILLER RECREATION EQUIPMENT AND DESIGN, INC.

Parks and Recreation believes it is in the best interest of the City to renew the contract for Bid #31041421 with MILLER RECREATION EQUIPMENT AND DESIGN, INC. Maintaining the current contract will allow for efficient maintenance and repair of existing and new equipment installed under this contract. The current pricing has been reviewed and remains fair and reasonable.

City of Tampa
Jane Castor, Mayor

Purchasing Department
DeAnna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E Hanna Avenue
Tampa, Florida 33610

Office (813) 274-8351
Fax: (813) 274-8355

September 12, 2024

Susan Miller
Miller Recreation Equipment & Design, Inc.
91760 Overseas Hwy, Suite 201
Tavernier, FL 33070
mrecfla@gmail.com

Dear Ms. Miller:

Your firm has an award with the City of Tampa to provide **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS ONLY), BID #31041421**

This existing award expires on **JANUARY 12, 2025**. Under the provisions of this award, terms and conditions may be renewed if mutually agreeable to both parties for an additional **one-year** period.

If your firm desires to renew the award, please complete and return the following:

- Statement of Intent
- Form MBD10 – "Schedule of All Sub-Contractors/Consultants/Suppliers Solicited"
- Form MBD20 – "Schedule of Sub-Contractors/Consultants/Suppliers to be Utilized"
- Form MBD50 – "Good Faith Effort Compliance Plan (GFECP) Guidelines"
- Form MBD30 – "Sub-Contractors/Consultant/Suppliers Payments"
- Affidavit of Compliance:
    - FS287.138 Compliance with Foreign Countries of Concern
    - FS287.133 Convicted Vendor List (Public Entity Crimes)
    - FS287.135 Prohibition Against Contracting with Scrutinized Companies
    - FS787.06 Prohibition Against Human Trafficking
    - FS448.095 Compliance With E-Verify

If your firm desires to renew the award, please complete and return the above listed documents. The MBD forms should document any subcontractors that are going to be used to provide goods/services for the award's renewal period and/or if any request for payments has been submitted. If payments were not requested or subcontractors were not used, please mark each form accordingly. **All documents must be submitted for the award/contract to be renewed.**

If you do not wish to renew, please indicate so on the attached Statement of Intent.

Sincerely,

Theresa Samuel
Purchasing Technician
(813) 274-8635
theresa.samuel@tampagov.net

Susan Miller 9/23/24

STATEMENT OF INTENT

I, Susan Miller,

being authorized to contract for Miller Recreation Equipment & Design, Inc., do hereby express the firm's desire to renew the above referenced agreement upon the same prices, same terms and conditions. I understand that an extension of the agreement requires the City's approval. This statement represents the above firm's binding approval of an extension of this agreement.

By: Susan Miller
Authorized Signature

9-12-24
Date

SUSAN MILLER
Type or Print Name Above

Title: V.P. / OWNER

Comments:

( ) We do not wish to renew this award. The source for non-renewal is:

By: _____
Authorized Signature

_____
Date

_____
Type or Print Name Above

Title: _____

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-10)

Contract No.: 21-P-00417 Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIP AND SURFACING, INSTALL, REPAIRS AND REPLACE (PRODUCTS ONLY)

Company Name: Miller Recreation Equipment & Design, Inc. Address: 7745 S.W. 193rd Lane, Cutler Bay, FL 33157

Federal ID: 65-0767594 Phone: 941-792-4580 Fax: N/A Email: mrecfla@gmail.com

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.

- [x] **No Firms were contacted or solicited for this contract.**
- [ ] **No Firms were contacted because:** _____
- [ ] **See attached list of additional Firms solicited and all supplemental information (List must comply to this form)**

Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=W/MBE O = Neither / Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N
65-0767594	Miller Recreation Equipment & Design, Inc.	O	912-77	E	Y

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub-contracting opportunities on this contract.

Signed: Susan Miller Name/Title: Susan Miller/Sales Rep/Owner Date: 09-12-2024

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

Page 2 of 4 – DMI Solicited/Utilized
Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) Solicited Form (Form MBD-10)

This form must be submitted with all bids or proposals. **All** subcontractors (regardless of ownership or size) solicited and subcontractors from whom unsolicited quotations were received must be included on this form. The instructions that follow correspond to the headings on the form required to be completed. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Firms were contacted or solicited for this contract.** Checking the box indicates that a pre-determined Subcontract Goal or Participation Plan Requirement was not set by the City resulting in your business not using subcontractors and will self-perform all work. If during the performance of the contract you employ subcontractors, the City must pre-approve subcontractors. Use of the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: Certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors.
- **No Firms were contacted because.** Provide brief explanation why no firms were contacted or solicited.
- **See attached documents.** Check box, if after you have completed the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the form. All DMI data not submitted on the MBD Form-10 must be in the same format and have all requested data from MBD Form-10 included.

The following instructions are for information of any and all subcontractors solicited.

- **"S" = SLBE, "W" = W/MBE.** Enter "S" for firms Certified by the City as Small Local Business Enterprises and/or "W" for firms Certified by the City as either Women/Minority Business Enterprise; **"O" = Non-certified others**.
- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification and payment of the contractor/subcontractor.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials** indicate the trade, service, or materials provided by the subcontractor. NIGP codes aka "National Institute of Governmental Purchasing" are listed at top section of document.
- **Contact Method L=letter, F=fax, E=Email, P=Phone.** Indicate with letter the method(s) of soliciting for bid.
- **Quote or Resp. (response) Rec'd (received) Y/N.** Indicate "Y" Yes if you received a quotation or if you received a response to your solicitation. Indicate "N" No if you received no response to your solicitation from the subcontractor. Must keep records: log, ledger, documentation, etc. that can validate/verify.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Susan Miller 9/23/14

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.: 21-P-00417 Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIP AND SURFACING, INSTALL, REPAIRS AND REPLACE (PRODUCTS ONLY)

Company Name: Miller Recreation Equipment & Design, Inc. Address: 7745 S.W. 193rd Lane, Cutler Bay, FL 33157

Federal ID: 65-0767594 Phone: 941-792-4580 Fax: n/a Email: mrecfla@gmail.com

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

☐ **See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)**

Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

☑ **No Subcontracting/consulting (of any kind) will be performed on this contract.**

☐ **No Firms are listed to be utilized because:** _____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=W/MBE O =Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %

Total ALL Subcontract / Supplier Utilization $ _____

Total SLBE Utilization $ _____

Total W/MBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. _____**% Percent W/MBE Utilization of Total Bid/Proposal Amt.** _____**%**

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

N/A

Signed: Susan Miller Name/Title: SUSAN MILLER Date: 9-23-24

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive Forms must be Included with Bid / Proposal

Page 4 of 4 DMI – Solicited/Utilized

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) to be Utilized Form (Form MBD-20)

This form must be submitted with all bids or proposals. All subcontractors (regardless of ownership or size) projected to be utilized must be included on this form. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

Contract No. This is the number assigned by the City of Tampa for the bid or proposal.

- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Subcontracting/consulting (of any kind) will be performed on this contract.** Checking box indicates your business will not use subcontractors when no Subcontract Goal or Participation Plan Requirement was set by the City, but will self-perform all work. When subcontractors are utilized during the performance of the contract, the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors, including completion and submitting Form-10 and Form-20.
- **No Firms listed To-Be-Utilized.** Check box; provide brief explanation why no firms were retained when a goal or participation plan requirement was set on the contract. **Note: Mandatory compliance with Good Faith Effort outreach (GFECP) requirements applies (MBD Form-50) and supporting documentation must accompany the bid.**
- **See attached documents.** Check box, if after completing the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the scope/value/percent utilization of subcontractors. Reproduce copies of MBD-20 and attach. All data not submitted on duplicate forms must be in the same format and content as specified in these instructions.

The following instructions are for information of Any and All subcontractors To Be Utilized.

- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **"S" = SLBE, "W" = W/MBE.** Enter "**S**" for firms Certified by the City as Small Local Business Enterprises and/or "**W**" for firms Certified by the City as Women/Minority Business Enterprise; **"O" = Non-certified others**.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials (NIGP code if Known)** Indicate the trade, service, or material provided by the subcontractor. Abbreviated list of NIGP is available at http:/www.tampagov.net/mbd "Information Resources".
- **Amount of Quote, Letters of Intent** (required for both SLBEs and W/MBEs).
- **Percent of Work/Contract.** Indicate the percent of the total contract price the subcontract(s) represent. For CCNA only (i.e. Consultant A/E Services) you must indicate subcontracts as percent of total scope/contract.
- **Total Subcontract/Supplier Utilization.** – Provide total dollar amount of all subcontractors/suppliers projected to be used for the contract. (Dollar amounts may be optional in CCNA depending on solicitation format).
- **Total SLBE Utilization**. Provide total dollar amount for all projected SLBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Total W/MBE Utilization.** Provide total dollar amount for all projected W/MBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Percent SLBE Utilization.** Total amount allocated to SLBEs divided by the total bid/proposal amount.
- **Percent W/MBE Utilization.** Total amount allocated to W/MBEs divided by the total bid/proposal amount.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Susan Miller 9/23/24

Failure to Complete, Sign, and Submit all Forms 10,20, & 50 SHALL render the Bid or Proposal Non-Responsive

Good Faith Effort Compliance Plan (GFECP) Guidelines

for Women/Minority Business Enterprise\Small Local Business Enterprise ParticipationCity of Tampa - Equal Business Opportunity Program

(Form MBD 50 – See detailed instructions on page 3 of 3)

Contract Name PARKS SITE FURNISHINGS, PLAYGROUND EQUIP AND SURFACING, INSTALL, REPAIRS AND REPLACE (PRODUCTS ONLY) **Bid Date** 09-12-2024

Bidder/Proposer Miller Recreation Equipment & Design, Inc.

Signature Susan Miller **Date** 09-12-2024

Name Susan Miller **Title** Owner/sales rep

The Compliance Plan with attachments is a true account of Good Faith Efforts (GFE) made to achieve the participation goals as specified for Women/Minority Business Enterprises & Small Local Business Enterprises (W/MBE & SLBE) on the referenced contract:

☐ **W/MBE & SLBE participation Goal is Not Specified for this Solicitation however participation is aspirational and GFECP is required.**

☐ **W/MBE & SLBE participation Goal is Met or Exceeded (refer to Goal-Set Form MBD-90).**

■ **W/MBE & SLBE participation Goal is Not Fully Achieved (refer to Goal-Set Form MBD-90).**

For each checkbox above Bidders/Proposers shall submit DMI Forms 10 and 20 which accurately report all subcontractors solicited and all subcontractors to-be-utilized. The following list is an overview of the required baseline GFECP action steps for all bids/proposals. Furthermore, it is understood that these GFECP requirements are weighted in the compliance evaluation based on the veracity and demonstrable degree of documentation provided with the bid/proposal:

(Check applicable boxes below - Must enclose supporting documents accordingly with Qualifying Remarks)

(1) Solicited through reasonable and available means the interest of W/MBE & SLBEs that have the capability to perform the work of the contract. The Bidder or Proposer must solicit this interest within enough time to allow the W/MBE & SLBEs to respond. The Bidder or Proposer must take appropriate steps to follow up initial solicitations with interested W/MBE & SLBEs. ☐ **See DMI report forms for subcontractors solicited.** ☐ **See enclosed supplemental data on solicitation efforts.** ☐ **Qualifying Remarks**

(2) Provided interested W/MBE & SLBEs with adequate, specific scope information about the plans, specifications, and requirements of the contract, including addenda, in a timely manner to assist them in responding to the requested scope identified by bidder/proposer for the solicitation. ☐ **See enclosed actual solicitations used.** ☐ **Qualifying Remarks**

(3) Negotiated in good faith with interested W/MBE & SLBEs that have submitted bids (e.g. adjusted quantities or scale). Documentation of negotiation must include the names, addresses, and telephone numbers of W/MBE & SLBEs that were solicited; the date of each such solicitation; a description of the information provided regarding the plans and specifications for the work selected for subcontracting; and evidence as to why agreements could not be reached with W/MBE & SLBEs to perform the work. Additional costs involved in soliciting and using subcontractors is not a sufficient reason for a bidder/proposer's failure to meet goals or achieve participation, as long as such costs are reasonable. Bidders are not required to accept excessive quotes in order to meet the goal.
☐ **DMI Utilized Forms for sub-(contractor/consultant) reflect genuine negotiations** ☐ **This project is an RFQ/RFP in nature and negotiations are limited to clarifications of scope/percentages, specifications, qualifications and subs fee schedules.** ☐ **See enclosed documentation.** ☐ **Qualifying Remarks**

(4) Not rejecting W/MBE & SLBEs as being unqualified without justification based on a thorough investigation of their capabilities. The W/MBE & SLBEs standing within its industry, membership in specific groups, organizations / associations and political or social affiliations are not legitimate causes for rejecting or not soliciting bids to meet the goals.
☐ **Not applicable.** ☐ **See attached justification for rejection of a subcontractor's bid or proposal.** ☐ **Qualifying Remarks**

(5) Made scope(s) of work available to W/MBE & SLBE subcontractors and suppliers; and, segmented portions of the work or material consistent with the available W/MBE & SLBE subcontractors and suppliers, to facilitate meeting the goal. ☐ **In addition, Sub-Contractors could bid on their own choice of work or trade without restriction to a pre-determined**

portion. ☐ **See enclosed comments.**☐ **Qualifying Remarks**

(6) Made good faith efforts, despite the ability or desire of Bidder/Proposer to perform the sub-tasks of a contract with its own forces/organization. A Bidder/Proposer who desires to self-perform the sub-tasks of a contract must demonstrate good faith efforts if the goal has not been met. ☐ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self-performed by the prime.** ☐ **Qualifying Remarks w/Documents**

(7) Segmented the portions of the work to be performed by W/MBEs & SLBEs in order to increase the likelihood that the goals will be met. This includes, where appropriate, breaking out contract work items into economically feasible units (quantities/scale) to facilitate W/MBE & SLBE participation, even when the Bidder/Proposer might otherwise prefer to perform these work items with its own forces. ☐ **Sub-Contractors could bid on their own choice of work or trade without restriction to a pre- determined portion.**☐ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self- performed by the prime.** ☐ **See enclosed comments.**☐ **Qualifying Remarks**

(8) Made efforts to assist interested W/MBEs & SLBEs in obtaining bonding, lines of credit, or insurance as required by the City or contractor.
☐ **See enclosed documentation on initiatives undertaken and methods to accomplish.** ☐ **Qualifying Remarks**

(9) Made efforts to assist interested W/MBEs & SLBEs in obtaining necessary equipment, supplies, materials, or related assistance or services, including participation in an acceptable mentor-protégé program. ☐ **See enclosed documentation of initiatives and/or agreements.** ☐ **Qualifying Remarks**

(10) Effectively used the services of the City and other organizations that provide assistance in the recruitment and placement of W/MBEs & SLBEs.
☐ **See enclosed documentation of services engaged.** ☐ **Overview (attached) of tactical actions and resources employed toward recruitment**

Note: Any unsolicited information in support of your Bid/RFP Compliance must accompany your submittal. ☐ **Identify Information Submitted**

Susan Miller 9/23/24

Participation Plan: Guidance for Complying with Good Faith Efforts Outreach (page 3 of 3)

(1) All firms on the W/MBE & SLBE Goal Setting List must be solicited and documentation provided for email, fax,letters, phone calls, and other methods of outreach/communication with the listed firms. The DMI Solicited and DMI-Utilized forms must be completed for all firms solicited and all firms utilized. Other opportunities for subcontracting should be explored to attain participation. May consult Tampa EBO Office and/or researching the on-line Diversity Management Business System Directory for Tampa certified W/MBE & SLBEfirms.

(2) Solicitation of W/MBE & SLBEs, via written or electronic notification, should provide specific information on the services needed, where plans can be reviewed and assistance offered in obtaining these, if required. Solicitations should be sent a minimum of a week (i.e. 5 city business days or more) before the bid/proposal date. Actual copies of the bidder's solicitation containing their scope-specific instructions should be provided.

(3) With any quotes received, a follow-up should be made when needed to confirm detail scope of work. For anyW/MBE & SLBE low quotes rejected, an explanation shall be provided detailing negotiation efforts.

(4) If a low bid W/MBE & SLBE is rejected or deemed unqualified the contractor must provide an explanation and supporting documentation for this decision.

(5) Prime shall break down portions of work into economical feasible opportunities for subcontracting. The W/MBE & SLBE directory may be useful in identifying additional subcontracting opportunities and certified firms not listed in the "W/MBE & SLBE Goal Setting Firms Contact List."

(6) Contractor shall not preclude W/MBE & SLBEs from bidding on any part of work, even if the Contractor may desire to self-perform aspects of the work.

(7) Contractor shall avoid relying solely on subcontracting those scopes of work where W/MBE & SLBE availabilityis not sufficient to attain pre-determined goals; including RFP/RFQ solicitations, all of which require GFECPcompliance to achieve sub-consultant participation.

(8) In its solicitations, the Bidder should offer assistance to W/MBE & SLBEs in obtaining bonding, insurance, et cetera, if required of subcontractors by the City or Prime Contractor.

(9) In its solicitation, the Bidder should offer assistance in obtaining equipment for a specific job to W/MBE & SLBEs, if needed. This includes mobilization where applicable.

(10) Contractor should use the services offered by such agencies as the Small Business Development Center (SBDC) @ University South Fla.; SBDC @ Hillsborough County Entrepreneur Collaborative Center; Hillsborough NAACP Empowerment Center; Hillsborough County Economic Development Department DM/DWBE/SBE Program and Prospera-Hispanic Business Assoc. to name a few for the recruitment and placement of available WMBEs/SLBEs.

Susan Miller 9/23/24

City of Tampa – DMI Sub-(Contractors/Consultants/Suppliers) Payments

(FORM MBD-30)

[ ] Partial [ ] Final

Contract No.: 21-P-00417 WO#,(if any): _____ Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIP AND SURFACING, INSTALL, REPAIRS AND REPLACE (PRODUCTS ONLY)

Contractor Name: _____ Address: 7745 S.W. 193rd Lane, Cutler Bay, FL 33157

Federal ID: 65-0767594 Phone: 941-792-4580 Fax: N/A Email: mrecfla@gmail.com

GC Pay Period: _____ Payment Request/Invoice Number: _____ City Department: _____

Total Amount Requested for pay period: $_____ Total Contract Amount (including change orders):$_____

-Type of Ownership - (F=Female M=Male), BF BM = African Am., HF HM = Hispanic Am., AF AM = Asian Am., NF NM = Native Am., CF CM = Caucasian S = SLBE

Type Trade/Work Activity []Sub []Supplier Federal ID	Company Name Address Phone & Fax	Total Sub Contract Or PO Amount	Amount Paid To Date Amount Pending Previously Reported	Amount To Be Paid For This Period Sub Pay Period Ending Date
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$

(Modifying This Form or Failure to Complete and Sign May Result in Non-Compliance)

Certification: I hereby certify that the above information is a true and accurate account of payments to sub – contractors/consultants on this contract.

Signed: Susan Miller Name/Title: Susan Miller/Sales Rep/Owner Date: 09-12-2024

Note: Detailed Instructions for completing this form are on the next page

Page 2 of 2 – DMI Payment

Instructions for completing The DMI Sub-(Contractors/Consultants/ Suppliers) Payment Form (Form MBD-30)

This form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the pay period. If applicable, after payment has been made to the subcontractor, "Waiver and Release of Lien upon Progress Payment", "Affidavit of Contractor in Connection with Final Payment", or an affidavit of payment must be submitted with the amount paid for the pay period. The following will detail what data is required for this form. The instructions that follow correspond to the headings on the form required to be completed. **(Modifying or omitted information from this form my result in non-compliance).**

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **W.O.#** If the report covers a work order number (W.O.#) for the contract, please indicate it in that space.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business.
- **Address.** The physical address of your business.
- **Federal ID.** A number assigned to a business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **Pay Period.** Provide start and finish dates for pay period. (e.g. 05/01/13 – 05/31/13)
- **Payment Request/Invoice Number.** Provide sequence number for payment requests. (ex. Payment one, write 1 in space, payment three, write 3 in space provided.)
- **City Department**. The City of Tampa department to which the contract pertains.
- **Total Amount Requested for pay period.** Provide all dollars you are expecting to receive for the pay period.
- **Total Contract Amount (including change orders).** Provide expected total contract amount. This includes any change orders that may increase or decrease the original contract amount.
- **Signed/Name/Title/Date**. This is your certification that the information provided on the form is accurate.
- **See attached documents.** Check if you have provided any additional documentation relating to the payment data. Located at the bottom middle of the form.
- **Partial Payment.** Check if the payment period is a partial payment, not a final payment. Located at the top right of the form.
- **Final Payment.** Check of this period is the final payment period. Located at the top right of the form.

The following instructions are for information of any and all subcontractors used for the pay period.

- **(Type) of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business or SLBE.
- **Trade/Work Activity.** Indicate the trade, service, or material provided by the subcontractor.
- **SubContractor/SubConsultant/Supplier.** Please indicate status of firm on this contract.
- **Federal ID.** A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Total Subcontract Amount.** Provide total amount of subcontract for subcontractor including change orders.
- **Amount Paid To Date.** Indicate all dollars paid to date for the subcontractor.
- **Amount Pending, Previously Reported.** Indicate any amount previously reported that payments are pending.
- **Amount To Be Paid for this Period.** Provide dollar amount of dollars requested for the pay period.
- **Sub Pay Period Ending Date.** Provide date for which subcontractor invoiced performed work.

Forms must be signed and dated or will be considered incomplete. The company authorized representative must sign and certify the information is true and accurate. Failure to sign this document or return the document unsigned can be cause for determining a company is in non-compliance of Ordinance 2008-89.

If any additional information is required or you have any questions, you may call the Office of Equal Business Opportunity at (813) 274-5522.

Susan Miller 9/23/24

AFFIDAVIT OF COMPLIANCE WITH FOREIGN COUNTRIES OF CONCERN PURSUANT TO SECTION 287.138, FLORIDA STATUTES, CONVICTED VENDOR LIST (PUBLIC ENTITY CRIME) PURSUANT TO SECTION 287.133, FLORIDA STATUTES, PROHIBITION AGAINST CONTRACTING WITH SCRUTINIZED COMPANIES PURSUANT TO SECTION 287.135, FLORIDA STATUTES, PROHIBITION AGAINST HUMAN TRAFFICKING PURSUANT TO SECTION 787.06, FLORIDA STATUTES, AND COMPLIANCE WITH E-VERIFY PURSUANT TO SECTION 448.095, FLORIDA STATUTES

The undersigned Affiant, on behalf of the Entity listed below ("Entity"), hereby attests under penalty of perjury as follows:

Public Entity Crimes

1. Affiant understands that a "person" or "affiliate" who has been placed on the "convicted vendor list" following a "conviction" for a "public entity crime" (as those terms are defined in Section 287.133, Florida Statutes) for a period of 36 months following the date of being placed on the convicted vendor list, is ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa. Entities placed on either the "discriminatory vendor list" or "antitrust vendor list" are ineligible to transact business with the City of Tampa.
2. Affiant understands and attests that neither Affiant, nor any person or affiliate of the Entity, nor the Entity have been placed on any of the above referenced vendor lists that would render the Entity ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa.

Scrutinized Companies

3. Affiant understands that pursuant to Section 287.135(2)(a), Florida Statutes, the Entity would be ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa if the Entity is on the "Scrutinized Companies that Boycott Israel List" (created pursuant to Section 215.4725, Florida Statutes) or is engaged in a boycott of Israel. If the value of the contract is one million dollars or more if, at the time of bidding on, submitting a proposal or reply for, or entering into or renewing a contract, the Entity:
    a. Is on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, created pursuant to Section 215.473, Florida Statutes; or
    b. Is engaged in business operations in Cuba or Syria.

4. Affiant attests that neither Affiant nor the Entity are on the Scrutinized Companies that Boycott Israel List, Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, nor are we engaged in a boycott of Israel, and understand that any resulting contract may be terminated for a falsification of this Affidavit.

E-Verify

5. Affiant understands and attests that pursuant to Section 448.095(5), Florida Statutes, the Entity must comply with Florida's E-Verify law to enter into a contract with the City of Tampa.
6. The undersigned Entity is registered with and uses the United States Department of Homeland Security's E-Verify system to verify the work authorization status of all new employees.
7. No public employer has terminated a contract with the Entity pursuant to Section 448.095(5), Florida Statutes, within the year immediately preceding the date of contracting or submitting a bid, proposal or replay to contract with the City of Tampa.
8. Entity is currently in compliance and will remain in compliance, for the duration of any contract with

Susan Miller 9/23/24

the City of Tampa, with all requirements of Section 448.095(5), Florida Statutes.

9. Affiant understands and attests that, if there is a good faith belief that the Entity has knowingly violated Section 448.09(1), Florida Statutes, there is an obligation on the part of the City of Tampa to terminate a contract pursuant to Section 448.095(5), Florida Statutes.
10. Affiant understands and attests that, if there is a good faith belief that one of Entity's subcontractor(s) has knowingly violated the Section 448.09(1), Florida Statutes, but the Entity has otherwise complied with its obligations thereunder, then the Entity will be required to immediately terminate the contract with the subcontractor in order to continue providing services to the City of Tampa.

Anti-Human Trafficking

11. Affiant hereby understands and attests that the undersigned Entity does not use coercion of labor or services as those terms are defined in section 787.06(13), Florida Statutes.

Compliance with Foreign Countries of Concern

12. Affiant, on behalf of the Entity attest to the following:
    a. Entity is not owned by the government of a foreign country of concern as defined in Section 287.138, Florida Statutes. (Source: § 287.138(2)(a), Florida Statutes.)

    b. The government of a foreign country of concern does not have a controlling interest in Entity. (Source: § 287.138(2)(b), Florida Statutes.)

    c. Entity is not organized under the laws of, and does not have a principal place of business in a foreign country of concern. (Source: § 287.138(2)(c), Florida Statutes.)

The undersigned is authorized to execute this Affidavit on behalf of Entity.

The undersigned further sayeth naught.

Date: 9/18/24 (Affiant) Signed: Susan Miller

Entity: Miller Recreation Equipment AND Design INC. Name: SUSAN MILLER

Title: V.P., owner, Salesrep

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

SWORN to (or affirmed) and subscribed before me, by means of ☒ physical presence or ☐ online notarization, this 18 day of SEPTEMBER, 2024 by SUSAN MILLER, as OWNER, who is personally known to me or who has produced FLDL as identification.

[AFFIX NOTARY SEAL/STAMP]

MICHELLE CATHERINE FAY
Notary Public
State of Florida
Comm# HH196650
Expires 11/8/2025

Signature of Notary

Name: Michelle Catherine Fay
(Print or Type Name)

Notary Public: State of Florida

My Commission Expires 11/8/2025

#VDT8QQYV0D2EO7v1

City of Tampa
Jane Castor, Mayor

Purchasing Department
Deanna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E. Hanna Ave.
Tampa, Florida 33610
Office: (813) 274-8351
Fax: (813) 274-8355

M E M O R A N D U M

DATE: July 17, 2024

TO: Lisa Grizzle
Parks & Recreation Administrative Manager
Parks and Recreation

FROM: Theresa Samuel, Purchasing Technician

RE: **REQUEST FOR RENEWAL/RE-BID**

The award for **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS ONLY), BID #31041421** provided by **SWARTZ ASSOCIATES, INC.** will expire on **JANUARY 12, 2025**. This award has a one-year renewal period. Per the terms of the contract, the vendor is entitled to request a **3.0%** escalation using the Consumer Price Index.

We are requesting information from you as to your needs relative to renewing the award for the above referenced goods. Please indicate your preference with an **(X)**, for one of the options listed below.

__x__ 1. You want to renew with the current vendor(s). ***Please attach to the Request for Renewal/Re-bid form an explanation as to why it is in the best interest of the Department to Re-new rather than Re-bid. Include a statement that the current pricing has been reviewed and remains fair and reasonable. The information that you provide will appear in the background section of the agenda request form that will appear before City Council. Please submit the MBD-30 payment form (if applicable) to this renewal. The MBD-30 form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the evaluation period.***

a.__x__ Please complete the attached **Vendor Performance Evaluation** form.

b._____ Please complete the attached **MBD-30 Sub-Contractor Payment** form **(if applicable for this renewal).**

	ESTIMATED EXPENDITURE	FUND	COST CENTER	ACCOUNT
FY_____	Controlled by Requisition			
FY_____				

(If funds are to be split between two fiscal years, please indicate the years and amounts)

____ 2. You do not want to renew with this vendor and would like to Re-bid. **Please provide an explanation:**

_____

_____

____ 3.You do not want to renew or re-bid at this time. (Let contract expire).

Please return this document and the requested information to my office by **July 23, 2024,** in order that we may process your request in a timely manner.

Dept. Contact Name (Printed): Danielle Riffenburg **Signature:** Danielle Riffenburg Digitally signed by Danielle Riffenburg Date: 2024.07.29 15:22:58 -04'00' **Date:**

Please fax to 813-274-8355 or email to theresa.samuel@tampagov.net

VENDOR PERFORMANCE EVALUATION

Name of Vendor Reviewed:	SWARTZ ASSOCIATES, INC.	
Contract Name & Number:	PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS ONLY), BID #31041421	
Rating Period	**From: 1/13/24**	**To: Present**

	Place an X for your selection	**Excellent**	**Satisfactory**	**Unsatisfactory**
Delivery/Service completed when required:	Delivered/Service as ordered and to spec?		**x**	
	Timeliness of Product/Service		**x**	
	Quality of Product/Service		**x**	
	Delivery of Products/ Complete/ Undamaged?		**x**	

Please Describe Quality of Product or Service: Products delivered are as expected.

Customer Satisfaction	Communication (Phone, E-Mail, or Fax availability)?		**x**	
	Responsiveness and proper follow up regarding any contractual or performance issues?		**x**	
	Product or Services fulfilled/completed		**x**	

Have you discussed issues with vendor? _____ Yes ___x___ No

Would you like to request a meeting with Purchasing & Vendor? _____Yes ___x___ No

Performance during rating period: No known issues with products or performance.

Customer Service Comments: Customer service is as expected.

Dept. Contact Name (Printed): Danielle Riffenburg **Signature:** Danielle Riffenburg Digitally signed by Danielle Riffenburg Date: 2024.08.29 15:23:21 -04'00'

Rev: 4/20/11

PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS ONLY), BID #31041421

SWARTZ ASSOCIATES, INC.

Parks and Recreation believes it is in the best interest of the City to renew the contract for Bid #31041421 with SWARTZ ASSOCIATES, INC. Maintaining the current contract will allow for efficient maintenance and repair of existing and new equipment installed under this contract. The current pricing has been reviewed and remains fair and reasonable.

STATEMENT OF INTENT

I, Dan Swartz,

being authorized to contract for Swartz Associates, Inc., do hereby express the firm's desire to renew the above referenced agreement upon the same prices, same terms and conditions. I understand that an extension of the agreement requires the City's approval. This statement represents the above firm's binding approval of an extension of this agreement.

By: _____ 9-17-24
Authorized Signature Date

Dan Swartz
Type or Print Name Above

Title: President

Comments:

( ) We do not wish to renew this award. The source for non-renewal is:

By: _____ _____
Authorized Signature Date

_____
Type or Print Name Above

Title: _____

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules
City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)
(FORM MBD-10)

Contract No.: 21-P-00417 Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIP AND SURFACING, INSTALL, REPAIRS AND REPLACE (PRODUCTS ONLY)

Company Name: Swartz Associates, Inc. Address: P.O. Box 112783

Federal ID: 65-0169405 Phone: 813-949-2288 Fax: none Email: mail@parkplayusa.com

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.

- [x] **No Firms were contacted or solicited for this contract.**
- [ ] **No Firms were contacted because:** _____
- [ ] **See attached list of additional Firms solicited and all supplemental information (List must comply to this form)**

Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=W/MBE O = Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub-contracting opportunities on this contract.

Signed: _____ Name/Title: Dan Swartz, Pres. Date: 9/16/24

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive
Forms must be included with Bid / Proposal

Tampa

Page 2 of 4 – DMI Solicited/Utilized

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) Solicited Form

(Form MBD-10)

This form must be submitted with all bids or proposals. All subcontractors (regardless of ownership or size) solicited and subcontractors from whom unsolicited quotations were received must be included on this form. The instructions that follow correspond to the headings on the form required to be completed. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Firms were contacted or solicited for this contract.** Checking the box indicates that a pre-determined Subcontract Goal or Participation Plan Requirement was not set by the City resulting in your business not using subcontractors and will self-perform all work. If during the performance of the contract you employ subcontractors, the City must pre-approve subcontractors. Use of the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: Certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors.
- **No Firms were contacted because.** Provide brief explanation why no firms were contacted or solicited.
- **See attached documents.** Check box, if after you have completed the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the form. All DMI data not submitted on the MBD Form-10 must be in the same format and have all requested data from MBD Form-10 included.

The following instructions are for information of any and all subcontractors solicited.

- **"S" = SLBE, "W" = W/MBE.** Enter "S" for firms Certified by the City as Small Local Business Enterprises and/or "W" for firms Certified by the City as either Women/Minority Business Enterprise; **"O" = Non-certified others.**
- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification and payment of the contractor/subcontractor.
- **Company Name, Address, Phone & Fax.** Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials** indicate the trade, service, or materials provided by the subcontractor. NIGP codes aka "National Institute of Governmental Purchasing" are listed at top section of document.
- **Contact Method L=letter, F=fax, E=Email, P=Phone.** Indicate with letter the method(s) of soliciting for bid.
- **Quote or Resp. (response) Rec'd (received) Y/N.** Indicate "Y" Yes if you received a quotation or if you received a response to your solicitation. Indicate "N" No if you received no response to your solicitation from the subcontractor. Must keep records: log, ledger, documentation, etc. that can validate/verify.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

PARKS SITE FURNISHINGS, PLAYGROUND EQUIP AND SURFACING, INSTALL, REPAIRS AND REPLACE (PRODUCTS ONLY)

Contract No.: 21-P-00417 Contract Name: _____

Company Name: Swartz Associates, Inc. Address: P.O. Box 112783, Naples, FL 34108

Federal ID: 65-0169405 Phone: 813-949-2288 Fax: none Email: mail@parkplayusa.com

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

☐ **See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)**

Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

☑ **No Subcontracting/consulting (of any kind) will be performed on this contract.**

☐ **No Firms are listed to be utilized because:** _____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=W/MBE O =Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %

Total ALL Subcontract / Supplier Utilization $_____

Total SLBE Utilization $ _____

Total W/MBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. _____% Percent W/MBE Utilization of Total Bid/Proposal Amt. _____%

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: _____ Name/Title: Dan Swartz, Pres. Date: 9/16/24

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive Forms must be included with Bid / Proposal

Failure to Complete, Sign and Submit this form with your Bid or Proposal Shall render the Bid Non-Responsive. (Do Not Modify This Form)

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) to be Utilized Form

(Form MBD-20)

This form must be submitted with all bids or proposals. All subcontractors (regardless of ownership or size) projected to be utilized must be included on this form. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

Contract No. This is the number assigned by the City of Tampa for the bid or proposal.

- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Subcontracting/consulting (of any kind) will be performed on this contract.** Checking box indicates your business will not use subcontractors when no Subcontract Goal or Participation Plan Requirement was set by the City, but will self-perform all work. When subcontractors are utilized during the performance of the contract, the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors, including completion and submitting Form-10 and Form-20.
- **No Firms listed To-Be-Utilized.** Check box; provide brief explanation why no firms were retained when a goal or participation plan requirement was set on the contract. **Note: Mandatory compliance with Good Faith Effort outreach (GFECP) requirements applies (MBD Form-50) and supporting documentation must accompany the bid.**
- **See attached documents.** Check box, if after completing the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the scope/value/percent utilization of subcontractors. Reproduce copies of MBD-20 and attach. All data not submitted on duplicate forms must be in the same format and content as specified in these instructions.

The following instructions are for information of Any and All subcontractors To Be Utilized.

- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **"S" = SLBE, "W" = W/MBE.** Enter "S" for firms Certified by the City as Small Local Business Enterprises and/or "W" for firms Certified by the City as Women/Minority Business Enterprise; **"O" = Non-certified others.**
- **Company Name, Address, Phone & Fax.** Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials (NIGP code if Known)** Indicate the trade, service, or material provided by the subcontractor. Abbreviated list of NIGP is available at http:/www.tampagov.net/mbd "Information Resources".
- **Amount of Quote, Letters of Intent** (required for both SLBEs and W/MBEs).
- **Percent of Work/Contract.** Indicate the percent of the total contract price the subcontract(s) represent. For CCNA only (i.e. Consultant A/E Services) you must indicate subcontracts as percent of total scope/contract.
- **Total Subcontract/Supplier Utilization.** – Provide total dollar amount of all subcontractors/suppliers projected to be used for the contract. (Dollar amounts may be optional in CCNA depending on solicitation format).
- **Total SLBE Utilization.** Provide total dollar amount for all projected SLBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Total W/MBE Utilization.** Provide total dollar amount for all projected W/MBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Percent SLBE Utilization.** Total amount allocated to SLBEs divided by the total bid/proposal amount.
- **Percent W/MBE Utilization.** Total amount allocated to W/MBEs divided by the total bid/proposal amount.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign, and Submit all Forms 10,20, & 50 SHALL render the Bid or Proposal Non-Responsive

Good Faith Effort Compliance Plan (GFECP) Guidelines

for Women/Minority Business Enterprise\Small Local Business Enterprise ParticipationCity of Tampa - Equal Business Opportunity Program

(Form MBD 50 – See detailed instructions on page 3 of 3)

Contract Name PARKS SITE FURNISHINGS, PLAYGROUND EQUIP AND SURFACING, INSTALL, REPAIRS AND REPLACE (PRODUCTS ONLY) Bid Date 5/13/21

Bidder/Proposer Swartz Associates, Inc.

Signature _____ Date 9/16/24

Name Dan Swartz Title Pres.

The Compliance Plan with attachments is a true account of Good Faith Efforts (GFE) made to achieve the participation goals as specified for Women/Minority Business Enterprises & Small Local Business Enterprises (W/MBE & SLBE) on the referenced contract:

■ **W/MBE & SLBE participation** Goal is Not Specified for this Solicitation **however participation is aspirational and GFECP is required.**

□ **W/MBE & SLBE participation** Goal is Met or Exceeded **(refer to Goal-Set Form MBD-90).**

□ **W/MBE & SLBE participation Goal is** Not Fully Achieved **(refer to Goal-Set Form MBD-90).**

For each checkbox above Bidders/Proposers shall submit DMI Forms 10 and 20 which accurately report all subcontractors solicited and all subcontractors to-be-utilized. The following list is an overview of the required baseline GFECP action steps for all bids/proposals. Furthermore, it is understood that these GFECP requirements are weighted in the compliance evaluation based on the veracity and demonstrable degree of documentation provided with the bid/proposal:

(Check applicable boxes below - Must enclose supporting documents accordingly with Qualifying Remarks)

(1) Solicited through reasonable and available means the interest of W/MBE & SLBEs that have the capability to perform the work of the contract. The Bidder or Proposer must solicit this interest within enough time to allow the W/MBE & SLBEs to respond. The Bidder or Proposer must take appropriate steps to follow up initial solicitations with interested W/MBE & SLBEs. □ **See DMI report forms for subcontractors solicited.** □ **See enclosed supplemental data on solicitation efforts.**
□ **Qualifying Remarks**

(2) Provided interested W/MBE & SLBEs with adequate, specific scope information about the plans, specifications, and requirements of the contract, including addenda, in a timely manner to assist them in responding to the requested scope identified by bidder/proposer for the solicitation. □ **See enclosed actual solicitations used.**
□ **Qualifying Remarks**

(3) Negotiated in good faith with interested W/MBE & SLBEs that have submitted bids (e.g. adjusted quantities or scale). Documentation of negotiation must include the names, addresses, and telephone numbers of W/MBE & SLBEs that were solicited; the date of each such solicitation; a description of the information provided regarding the plans and specifications for the work selected for subcontracting; and evidence as to why agreements could not be reached with W/MBE & SLBEs to perform the work. Additional costs involved in soliciting and using subcontractors is not a sufficient reason for a bidder/proposer's failure to meet goals or achieve participation, as long as such costs are reasonable. Bidders are not required to accept excessive quotes in order to meet the goal.
□ **DMI Utilized Forms for sub-(contractor/consultant) reflect genuine negotiations** □ **This project is an RFQ/RFP in nature and negotiationsare limited to clarifications of scope/percentages, specifications, qualifications and subs fee schedules.**
□ **See enclosed documentation.**
□ **Qualifying Remarks**

(4) Not rejecting W/MBE & SLBEs as being unqualified without justification based on a thorough investigation of their capabilities. The W/MBE & SLBEs standing within its industry, membership in specific groups, organizations / associations and political or social affiliations are not legitimate causes for rejecting or not soliciting bids to meet the goals.
□ **Not applicable.** □ **See attached justification for rejection of a subcontractor's bid or proposal.** □ **Qualifying Remarks**

(5) Made scope(s) of work available to W/MBE & SLBE subcontractors and suppliers; and, segmented portions of the work or material consistent with the available W/MBE & SLBE subcontractors and suppliers, to facilitate meeting the goal. □ **In addition, Sub-Contractors could bid on their own choice of work or trade without restriction to a pre-determined**

portion. □ See enclosed comments.□ Qualifying Remarks

(6) Made good faith efforts, despite the ability or desire of Bidder/Proposer to perform the sub-tasks of a contract with its own forces/organization. A Bidder/Proposer who desires to self-perform the sub-tasks of a contract must demonstrate good faith efforts if the goal has not been met. **□ Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self-performed by the prime. □ Qualifying Remarks w/Documents**

(7) Segmented the portions of the work to be performed by W/MBEs & SLBEs in order to increase the likelihood that the goals will be met. This includes, where appropriate, breaking out contract work items into economically feasible units (quantities/scale) to facilitate W/MBE & SLBE participation, even when the Bidder/Proposer might otherwise prefer to perform these work items with its own forces. **□ Sub-Contractors could bid on their own choice of work or trade without restriction to a pre- determined portion.□ Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self- performed by the prime. □ See enclosed comments.□ Qualifying Remarks**

(8) Made efforts to assist interested W/MBEs & SLBEs in obtaining bonding, lines of credit, or insurance as required by the City or contractor.
□ See enclosed documentation on initiatives undertaken and methods to accomplish. □ Qualifying Remarks

(9) Made efforts to assist interested W/MBEs & SLBEs in obtaining necessary equipment, supplies, materials, or related assistance or services, including participation in an acceptable mentor-protégé program. **□ See enclosed documentation of initiatives and/or agreements. □ Qualifying Remarks**

(10) Effectively used the services of the City and other organizations that provide assistance in the recruitment and placement of W/MBEs & SLBEs.
□ See enclosed documentation of services engaged. □ Overview (attached) of tactical actions and resources employed toward recruitment

Note: Any unsolicited information in support of your Bid/RFP Compliance must accompany your submittal. **□ Identify Information Submitted**

Participation Plan: Guidance for Complying with Good Faith Efforts Outreach (page 3 of 3)

(1) All firms on the W/MBE & SLBE Goal Setting List must be solicited and documentation provided for email, fax,letters, phone calls, and other methods of outreach/communication with the listed firms. The DMI Solicited and DMI-Utilized forms must be completed for all firms solicited and all firms utilized. Other opportunities for subcontracting should be explored to attain participation. May consult Tampa EBO Office and/or researching the on-line Diversity Management Business System Directory for Tampa certified W/MBE & SLBEfirms.

(2) Solicitation of W/MBE & SLBEs, via written or electronic notification, should provide specific information on the services needed, where plans can be reviewed and assistance offered in obtaining these, if required. Solicitations should be sent a minimum of a week (i.e. 5 city business days or more) before the bid/proposal date. Actual copies of the bidder's solicitation containing their scope-specific instructions should be provided.

(3) With any quotes received, a follow-up should be made when needed to confirm detail scope of work. For anyW/MBE & SLBE low quotes rejected, an explanation shall be provided detailing negotiation efforts.

(4) If a low bid W/MBE & SLBE is rejected or deemed unqualified the contractor must provide an explanation and supporting documentation for this decision.

(5) Prime shall break down portions of work into economical feasible opportunities for subcontracting. The W/MBE & SLBE directory may be useful in identifying additional subcontracting opportunities and certified firms not listed in the "W/MBE & SLBE Goal Setting Firms Contact List."

(6) Contractor shall not preclude W/MBE & SLBEs from bidding on any part of work, even if the Contractor may desire to self-perform aspects of the work.

(7) Contractor shall avoid relying solely on subcontracting those scopes of work where W/MBE & SLBE availabilityis not sufficient to attain pre-determined goals; including RFP/RFQ solicitations, all of which require GFECPcompliance to achieve sub-consultant participation.

(8) In its solicitations, the Bidder should offer assistance to W/MBE & SLBEs in obtaining bonding, insurance, et cetera, if required of subcontractors by the City or Prime Contractor.

(9) In its solicitation, the Bidder should offer assistance in obtaining equipment for a specific job to W/MBE & SLBEs, if needed. This includes mobilization where applicable.

(10) Contractor should use the services offered by such agencies as the Small Business Development Center (SBDC) @ University South Fla.; SBDC @ Hillsborough County Entrepreneur Collaborative Center; Hillsborough NAACP Empowerment Center; Hillsborough County Economic Development Department DM/DWBE/SBE Program and Prospera-Hispanic Business Assoc. to name a few for the recruitment and placement of available WMBEs/SLBEs.

City of Tampa

Page 1 of 2 –DMI Payment
City of Tampa – DMI Sub-(Contractors/Consultants/Suppliers) Payments
(FORM MBD-30)

[ ] Partial [ ] Final

Contract No.: _____ WO#,(if any): _____ Contract Name: _____

Contractor Name: Swartz Associates, Inc Address: PO Box 112783

Federal ID: 65-0169405 Phone: 813-949-2288 Fax: none Email: mai@parkplayusa.com

GC Pay Period: _____ Payment Request/Invoice Number: _____ City Department: _____

Total Amount Requested for pay period: $_____ Total Contract Amount (including change orders):$_____

-Type of Ownership - (F=Female M=Male), BF BM = African Am., HF HM = Hispanic Am., AF AM = Asian Am., NF NM = Native Am., CF CM = Caucasian S = SLBE

Type Trade/Work Activity []Sub []Supplier Federal ID	Company Name Address Phone & Fax	Total Sub Contract Or PO Amount	Amount Paid To Date Amount Pending Previously Reported	Amount To Be Paid For This Period Sub Pay Period Ending Date
			$	$
			$	$
	N/A		$	$
			$	$
			$	$
			$	$

(Modifying This Form or Failure to Complete and Sign May Result in Non-Compliance)

Certification: I hereby certify that the above information is a true and accurate account of payments to sub – contractors/consultants on this contract.

Signed: _____ Name/Title: Dan Swartz, Pres Date: 10/30/24

DMI form 30 (rev. 01/15/2020)

Note: Detailed Instructions for completing this form are on the next page

Tampa

Page 2 of 2 – DMI Payment

Instructions for completing The DMI Sub-(Contractors/Consultants/ Suppliers) Payment Form (Form MBD-30)

This form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the pay period. If applicable, after payment has been made to the subcontractor, "Waiver and Release of Lien upon Progress Payment", "Affidavit of Contractor in Connection with Final Payment", or an affidavit of payment must be submitted with the amount paid for the pay period. The following will detail what data is required for this form. The instructions that follow correspond to the headings on the form required to be completed. **(Modifying or omitted information from this form my result in non-compliance).**

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **W.O.#** If the report covers a work order number (W.O.#) for the contract, please indicate it in that space.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business.
- **Address.** The physical address of your business.
- **Federal ID.** A number assigned to a business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **Pay Period.** Provide start and finish dates for pay period. (e.g. 05/01/13 – 05/31/13)
- **Payment Request/Invoice Number.** Provide sequence number for payment requests. (ex. Payment one, write 1 in space, payment three, write 3 in space provided.)
- **City Department**. The City of Tampa department to which the contract pertains.
- **Total Amount Requested for pay period.** Provide all dollars you are expecting to receive for the pay period.
- **Total Contract Amount (including change orders).** Provide expected total contract amount. This includes any change orders that may increase or decrease the original contract amount.
- **Signed/Name/Title/Date**. This is your certification that the information provided on the form is accurate.
- **See attached documents.** Check if you have provided any additional documentation relating to the payment data. Located at the bottom middle of the form.
- **Partial Payment.** Check if the payment period is a partial payment, not a final payment. Located at the top right of the form.
- **Final Payment.** Check of this period is the final payment period. Located at the top right of the form.

The following instructions are for information of any and all subcontractors used for the pay period.

- **(Type) of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business or SLBE.
- **Trade/Work Activity.** Indicate the trade, service, or material provided by the subcontractor.
- **SubContractor/SubConsultant/Supplier.** Please indicate status of firm on this contract.
- **Federal ID.** A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **Company Name, Address, Phone & Fax.** Provide company information for verification of payments.
- **Total Subcontract Amount.** Provide total amount of subcontract for subcontractor including change orders.
- **Amount Paid To Date.** Indicate all dollars paid to date for the subcontractor.
- **Amount Pending, Previously Reported.** Indicate any amount previously reported that payments are pending.
- **Amount To Be Paid for this Period.** Provide dollar amount of dollars requested for the pay period.
- **Sub Pay Period Ending Date.** Provide date for which subcontractor invoiced performed work.

Forms must be signed and dated or will be considered incomplete. The company authorized representative must sign and certify the information is true and accurate. Failure to sign this document or return the document unsigned can be cause for determining a company is in non-compliance of Ordinance 2008-89.

If any additional information is required or you have any questions, you may call the Office of Equal Business Opportunity at (813) 274-5522.

AFFIDAVIT OF COMPLIANCE WITH FOREIGN COUNTRIES OF CONCERN PURSUANT TO SECTION 287.138, FLORIDA STATUTES, CONVICTED VENDOR LIST (PUBLIC ENTITY CRIME) PURSUANT TO SECTION 287.133, FLORIDA STATUTES, PROHIBITION AGAINST CONTRACTING WITH SCRUTINIZED COMPANIES PURSUANT TO SECTION 287.135, FLORIDA STATUTES, PROHIBITION AGAINST HUMAN TRAFFICKING PURSUANT TO SECTION 787.06, FLORIDA STATUTES, AND COMPLIANCE WITH E-VERIFY PURSUANT TO SECTION 448.095, FLORIDA STATUTES

The undersigned Affiant, on behalf of the Entity listed below ("Entity"), hereby attests under penalty of perjury as follows:

Public Entity Crimes

1. Affiant understands that a "person" or "affiliate" who has been placed on the "convicted vendor list" following a "conviction" for a "public entity crime" (as those terms are defined in Section 287.133, Florida Statutes) for a period of 36 months following the date of being placed on the convicted vendor list, is ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa. Entities placed on either the "discriminatory vendor list" or "antitrust vendor list" are ineligible to transact business with the City of Tampa.
2. Affiant understands and attests that neither Affiant, nor any person or affiliate of the Entity, nor the Entity have been placed on any of the above referenced vendor lists that would render the Entity ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa.

Scrutinized Companies

3. Affiant understands that pursuant to Section 287.135(2)(a), Florida Statutes, the Entity would be ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa if the Entity is on the "Scrutinized Companies that Boycott Israel List" (created pursuant to Section 215.4725, Florida Statutes) or is engaged in a boycott of Israel. If the value of the contract is one million dollars or more if, at the time of bidding on, submitting a proposal or reply for, or entering into or renewing a contract, the Entity:
    a. Is on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, created pursuant to Section 215.473, Florida Statutes; or
    b. Is engaged in business operations in Cuba or Syria.

4. Affiant attests that neither Affiant nor the Entity are on the Scrutinized Companies that Boycott Israel List, Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, nor are we engaged in a boycott of Israel, and understand that any resulting contract may be terminated for a falsification of this Affidavit.

E-Verify

5. Affiant understands and attests that pursuant to Section 448.095(5), Florida Statutes, the Entity must comply with Florida's E-Verify law to enter into a contract with the City of Tampa.
6. The undersigned Entity is registered with and uses the United States Department of Homeland Security's E-Verify system to verify the work authorization status of all new employees.
7. No public employer has terminated a contract with the Entity pursuant to Section 448.095(5), Florida Statutes, within the year immediately preceding the date of contracting or submitting a bid, proposal or replay to contract with the City of Tampa.
8. Entity is currently in compliance and will remain in compliance, for the duration of any contract with

the City of Tampa, with all requirements of Section 448.095(5), Florida Statutes.

9. Affiant understands and attests that, if there is a good faith belief that the Entity has knowingly violated Section 448.09(1), Florida Statutes, there is an obligation on the part of the City of Tampa to terminate a contract pursuant to Section 448.095(5), Florida Statutes.
10. Affiant understands and attests that, if there is a good faith belief that one of Entity's subcontractor(s) has knowingly violated the Section 448.09(1), Florida Statutes, but the Entity has otherwise complied with its obligations thereunder, then the Entity will be required to immediately terminate the contract with the subcontractor in order to continue providing services to the City of Tampa.

Anti-Human Trafficking

11. Affiant hereby understands and attests that the undersigned Entity does not use coercion of labor or services as those terms are defined in section 787.06(13), Florida Statutes.

Compliance with Foreign Countries of Concern

12. Affiant, on behalf of the Entity attest to the following:
    a. Entity is not owned by the government of a foreign country of concern as defined in Section 287.138, Florida Statutes. (Source: § 287.138(2)(a), Florida Statutes.)

    b. The government of a foreign country of concern does not have a controlling interest in Entity. (Source: § 287.138(2)(b), Florida Statutes.)

    c. Entity is not organized under the laws of, and does not have a principal place of business in a foreign country of concern. (Source: § 287.138(2)(c), Florida Statutes.)

The undersigned is authorized to execute this Affidavit on behalf of Entity.

The undersigned further sayeth naught.

Date: 10-21-24 (Affiant) Signed: _____

Entity: Swartz Associates Name: Dan Swartz

Title: Pres

STATE OF FL
COUNTY OF Collier

SWORN to (or affirmed) and subscribed before me, by means of ☒ physical presence or ☐ online notarization, this 21st day of October, 2024, by Dan Swartz, as _____, who is personally known to me or who has produced _____ as identification.

[AFFIX NOTARY SEAL/STAMP]

_____
Signature of Notary

Name: _____
(Print or Type Name)

Notary Public: State of Florida
My Commission Expires: _____

CHRISTINE HAROOTUNIAN
Commission # HH 598845
Expires October 2, 2028

#VDT8QQYV0D2EO7v1

City of Tampa
Jane Castor, Mayor

Purchasing Department
Deanna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E. Hanna Ave.
Tampa, Florida 33610
Office: (813) 274-8351
Fax: (813) 274-8355

M E M O R A N D U M

DATE: July 17, 2024

TO: Lisa Grizzle
Parks & Recreation Administrative Manager
Parks and Recreation

FROM: Theresa Samuel, Purchasing Technician

RE: **REQUEST FOR RENEWAL/RE-BID**

The award for **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421** provided by **ADVANCED RECREATIONAL CONCEPTS, LLC** will expire on **JANUARY 12, 2025**. This award has a one-year renewal period. Per the terms of the contract, the vendor is entitled to request a **3.0%** escalation using the Consumer Price Index.

We are requesting information from you as to your needs relative to renewing the award for the above referenced goods. Please indicate your preference with an **(X)**, for one of the options listed below.

__x__ 1. You want to renew with the current vendor(s). ***Please attach to the Request for Renewal/Re-bid form an explanation as to why it is in the best interest of the Department to Re-new rather than Re-bid. Include a statement that the current pricing has been reviewed and remains fair and reasonable. The information that you provide will appear in the background section of the agenda request form that will appear before City Council. Please submit the MBD-30 payment form (if applicable) to this renewal. The MBD-30 form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the evaluation period.***

a.__x__ Please complete the attached **Vendor Performance Evaluation** form.

b._____ Please complete the attached **MBD-30 Sub-Contractor Payment** form **(if applicable for this renewal).**

	ESTIMATED EXPENDITURE	**FUND**	**COST CENTER**	**ACCOUNT**
FY_____	Controlled by requisition			
FY_____				

(If funds are to be split between two fiscal years, please indicate the years and amounts)

____ 2. You do not want to renew with this vendor and would like to Re-bid. **Please provide an explanation:**

_____

_____

____ 3.You do not want to renew or re-bid at this time. (Let contract expire).

Please return this document and the requested information to my office by **July 23, 2024,** in order that we may process your request in a timely manner.

Dept. Contact Name (Printed): Danielle Riffenburg **Signature:** _____ **Date:** _____

Please fax to 813-274-8355 or email to theresa.samuel@tampagov.net

VENDOR PERFORMANCE EVALUATION

Name of Vendor Reviewed:	ADVANCED RECREATIONAL CONCEPTS, LLC	
Contract Name & Number:	PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421	
Rating Period	**From: 1/13/24**	**To: Present**

	Place an X for your selection	**Excellent**	**Satisfactory**	**Unsatisfactory**
Delivery/Service completed when required:	Delivered/Service as ordered and to spec?		**x**	
	Timeliness of Product/Service		**x**	
	Quality of Product/Service		**x**	
	Delivery of Products/ Complete/ Undamaged?		**x**	

Please Describe Quality of Product or Service: Products delivered are as expected.

	Communication (Phone, E-Mail, or Fax availability)?		**x**	
	Responsiveness and proper follow up regarding any contractual or performance issues?		**x**	
Customer Satisfaction	Product or Services fulfilled/completed		**x**	

Have you discussed issues with vendor? _____ Yes ___x___ No

Would you like to request a meeting with Purchasing & Vendor? _____Yes ___x___ No

Performance during rating period: No known issues with products or performance.

Customer Service Comments: Customer service is as expected.

Dept. Contact Name (Printed): _Danielle Riffenburg_____ **Signature:** Danielle Riffenburg Digitally signed by Danielle Riffenburg Date: 2024.08.29 15:24:30 -04'00'

Rev: 4/20/11

PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

ADVANCED RECREATIONAL CONCEPTS, LLC

Parks and Recreation believes it is in the best interest of the City to renew the contract for Bid #31041421 with ADVANCED RECREATIONAL CONCEPTS, LLC. Maintaining the current contract will allow for efficient maintenance and repair of existing and new equipment installed under this contract. The current pricing has been reviewed and remains fair and reasonable.

City of Tampa
Jane Castor, Mayor

Purchasing Department
DeAnna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E Hanna Avenue
Tampa, Florida 33610

Office (813) 274-8351
Fax: (813) 274-8355

September 12, 2024

Matt Gagnon
Advanced Recreational Concepts
3125 Skyway Cir.
Melbourne, FL 32934
info@arcflorida.com

Dear Mr. Gagnon:

Your firm has an award with the City of Tampa to provide **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421**

This existing award expires on **JANUARY 12, 2025**. Under the provisions of this award, terms and conditions may be renewed if mutually agreeable to both parties for an additional **one-year** period.

If your firm desires to renew the award, please complete and return the following:

- Statement of Intent
- Form MBD10 – "Schedule of All Sub-Contractors/Consultants/Suppliers Solicited"
- Form MBD20 – "Schedule of Sub-Contractors/Consultants/Suppliers to be Utilized"
- Form MBD50 – "Good Faith Effort Compliance Plan (GFECP) Guidelines"
- Form MBD30 – "Sub-Contractors/Consultant/Suppliers Payments"
- Affidavit of Compliance:
    - FS287.138 Compliance with Foreign Countries of Concern
    - FS287.133 Convicted Vendor List (Public Entity Crimes)
    - FS287.135 Prohibition Against Contracting with Scrutinized Companies
    - FS787.06 Prohibition Against Human Trafficking
    - FS448.095 Compliance With E-Verify

If your firm desires to renew the award, please complete and return the above listed documents. The MBD forms should document any subcontractors that are going to be used to provide goods/services for the award's renewal period and/or if any request for payments has been submitted. If payments were not requested or subcontractors were not used, please mark each form accordingly. **All documents must be submitted for the award/contract to be renewed.**

If you do not wish to renew, please indicate so on the attached Statement of Intent.

Sincerely,

Theresa Samuel
Purchasing Technician
(813) 274-8635
theresa.samuel@tampagov.net

STATEMENT OF INTENT

I, Paul Bickham,

being authorized to contract for Advanced Recreational Concepts, do hereby express the firm's desire to renew the above referenced agreement upon the same prices, same terms and conditions. I understand that an extension of the agreement requires the City's approval. This statement represents the above firm's binding approval of an extension of this agreement.

By: _____ 9.16.2024
Authorized Signature Date

Paul Bickham
Type or Print Name Above

Title: Owner

Comments:

( ) We do not wish to renew this award. The source for non-renewal is:

By: _____ _____
Authorized Signature Date

_____
Type or Print Name Above

Title: _____

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-10)

Contract No.: 21-P-00417 Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

Company Name: Advanced Recreational Concepts Address: 3127 Skyway Cir

Federal ID: 20-0520823 Phone: 321-725-0600 Fax: _____ Email: info@arcflor.da.com

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.

- [X] **No Firms were contacted or solicited for this contract.**
- [ ] **No Firms were contacted because:** _____
- [ ] **See attached list of additional Firms solicited and all supplemental information (List must comply to this form)**

Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=W/MBE O = Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub-contracting opportunities on this contract.

Signed: _____ Name/Title: Paul Bickham / Owner Date: 9.16.2024

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

Page 2 of 4 – DMI Solicited/Utilized
Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) Solicited Form (Form MBD-10)

This form must be submitted with all bids or proposals. **All** subcontractors (regardless of ownership or size) solicited and subcontractors from whom unsolicited quotations were received must be included on this form. The instructions that follow correspond to the headings on the form required to be completed. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Firms were contacted or solicited for this contract.** Checking the box indicates that a pre-determined Subcontract Goal or Participation Plan Requirement was not set by the City resulting in your business not using subcontractors and will self-perform all work. If during the performance of the contract you employ subcontractors, the City must pre-approve subcontractors. Use of the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: Certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors.
- **No Firms were contacted because.** Provide brief explanation why no firms were contacted or solicited.
- **See attached documents.** Check box, if after you have completed the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the form. All DMI data not submitted on the MBD Form-10 must be in the same format and have all requested data from MBD Form-10 included.

The following instructions are for information of any and all subcontractors solicited.

- **"S" = SLBE, "W" = W/MBE.** Enter "**S**" for firms Certified by the City as Small Local Business Enterprises and/or "**W**" for firms Certified by the City as either Women/Minority Business Enterprise; **"O" = Non-certified others**.
- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification and payment of the contractor/subcontractor.
- **Company Name, Address, Phone & Fax.** Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials** indicate the trade, service, or materials provided by the subcontractor. NIGP codes aka "National Institute of Governmental Purchasing" are listed at top section of document.
- **Contact Method L=letter, F=fax, E=Email, P=Phone.** Indicate with letter the method(s) of soliciting for bid.
- **Quote or Resp. (response) Rec'd (received) Y/N.** Indicate "Y" Yes if you received a quotation or if you received a response to your solicitation. Indicate "N" No if you received no response to your solicitation from the subcontractor. Must keep records: log, ledger, documentation, etc. that can validate/verify.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.: 21-P-00417 Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

Company Name: Advanced Recreational Concepts Address: 3125 Kyrway Cir Ste 101 Melbourne, FL 32934

Federal ID: 20-0520623 Phone: _____ Fax: _____ Email: _____

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

☐ **See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)**

Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

☒ **No Subcontracting/consulting (of any kind) will be performed on this contract.**

☐ **No Firms are listed to be utilized because:** _____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=W/MBE O =Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %

Total ALL Subcontract / Supplier Utilization $_____

Total SLBE Utilization $ _____

Total W/MBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. _____**% Percent W/MBE Utilization of Total Bid/Proposal Amt.** _____**%**

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: _____ Name/Title: Paul Buckham / Owner Date: 9/16/2024

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive Forms must be included with Bid / Proposal

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) to be Utilized Form

(Form MBD-20)

This form must be submitted with all bids or proposals. All subcontractors (regardless of ownership or size) projected to be utilized must be included on this form. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

Contract No. This is the number assigned by the City of Tampa for the bid or proposal.

- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Subcontracting/consulting (of any kind) will be performed on this contract.** Checking box indicates your business will not use subcontractors when no Subcontract Goal or Participation Plan Requirement was set by the City, but will self-perform all work. When subcontractors are utilized during the performance of the contract, the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors, including completion and submitting Form-10 and Form-20.
- **No Firms listed To-Be-Utilized.** Check box; provide brief explanation why no firms were retained when a goal or participation plan requirement was set on the contract. **Note: Mandatory compliance with Good Faith Effort outreach (GFECP) requirements applies (MBD Form-50) and supporting documentation must accompany the bid.**
- **See attached documents.** Check box, if after completing the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the scope/value/percent utilization of subcontractors. Reproduce copies of MBD-20 and attach. All data not submitted on duplicate forms must be in the same format and content as specified in these instructions.

The following instructions are for information of Any and All subcontractors To Be Utilized.

- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **"S" = SLBE, "W" = W/MBE.** Enter "**S**" for firms Certified by the City as Small Local Business Enterprises and/or "**W**" for firms Certified by the City as Women/Minority Business Enterprise; **"O" = Non-certified others**.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials (NIGP code if Known)** Indicate the trade, service, or material provided by the subcontractor. Abbreviated list of NIGP is available at http:/www.tampagov.net/mbd "Information Resources".
- **Amount of Quote, Letters of Intent** (required for both SLBEs and W/MBEs).
- **Percent of Work/Contract.** Indicate the percent of the total contract price the subcontract(s) represent. For CCNA only (i.e. Consultant A/E Services) you must indicate subcontracts as percent of total scope/contract.
- **Total Subcontract/Supplier Utilization.** – Provide total dollar amount of all subcontractors/suppliers projected to be used for the contract. (Dollar amounts may be optional in CCNA depending on solicitation format).
- **Total SLBE Utilization.** Provide total dollar amount for all projected SLBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Total W/MBE Utilization.** Provide total dollar amount for all projected W/MBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Percent SLBE Utilization.** Total amount allocated to SLBEs divided by the total bid/proposal amount.
- **Percent W/MBE Utilization.** Total amount allocated to W/MBEs divided by the total bid/proposal amount.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign, and Submit all Forms 10,20, & 50 SHALL render the Bid or Proposal Non-Responsive

Good Faith Effort Compliance Plan (GFECP) Guidelines

for Women/Minority Business Enterprise\Small Local Business Enterprise ParticipationCity of Tampa - Equal Business Opportunity Program

(Form MBD 50 – See detailed instructions on page 3 of 3)

Contract Name PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421 Bid Date _____

Bidder/Proposer Advanced Recreational Concepts

Signature _____ Date 9.16.2024

Name Paul Bickham Title Owner

The Compliance Plan with attachments is a true account of Good Faith Efforts (GFE) made to achieve the participation goals as specified for Women/Minority Business Enterprises & Small Local Business Enterprises (W/MBE & SLBE) on the referenced contract:

☐ **W/MBE & SLBE participation Goal is Not Specified for this Solicitation however participation is aspirational and GFECP is required.**

☐ **W/MBE & SLBE participation Goal is Met or Exceeded (refer to Goal-Set Form MBD-90).**

☐ **W/MBE & SLBE participation Goal is Not Fully Achieved (refer to Goal-Set Form MBD-90).**

For each checkbox above Bidders/Proposers shall submit DMI Forms 10 and 20 which accurately report all subcontractors solicited and all subcontractors to-be-utilized. The following list is an overview of the required baseline GFECP action steps for all bids/proposals. Furthermore, it is understood that these GFECP requirements are weighted in the compliance evaluation based on the veracity and demonstrable degree of documentation provided with the bid/proposal:

(Check applicable boxes below - Must enclose supporting documents accordingly with Qualifying Remarks)

(1) Solicited through reasonable and available means the interest of W/MBE & SLBEs that have the capability to perform the work of the contract. The Bidder or Proposer must solicit this interest within enough time to allow the W/MBE & SLBEs to respond. The Bidder or Proposer must take appropriate steps to follow up initial solicitations with interested W/MBE & SLBEs. □ **See DMI report forms for subcontractors solicited.** □ **See enclosed supplemental data on solicitation efforts.**

□ **Qualifying Remarks**

(2) Provided interested W/MBE & SLBEs with adequate, specific scope information about the plans, specifications, and requirements of the contract, including addenda, in a timely manner to assist them in responding to the requested scope identified by bidder/proposer for the solicitation. □ **See enclosed actual solicitations used.**
□ **Qualifying Remarks**

(3) Negotiated in good faith with interested W/MBE & SLBEs that have submitted bids (e.g. adjusted quantities or scale). Documentation of negotiation must include the names, addresses, and telephone numbers of W/MBE & SLBEs that were solicited; the date of each such solicitation; a description of the information provided regarding the plans and specifications for the work selected for subcontracting; and evidence as to why agreements could not be reached with W/MBE & SLBEs to perform the work. Additional costs involved in soliciting and using subcontractors is not a sufficient reason for a bidder/proposer's failure to meet goals or achieve participation, as long as such costs are reasonable. Bidders are not required to accept excessive quotes in order to meet the goal.
□ **DMI Utilized Forms for sub-(contractor/consultant) reflect genuine negotiations** □ **This project is an RFQ/RFP in nature and negotiationsare limited to clarifications of scope/percentages, specifications, qualifications and subs fee schedules.**
□ **See enclosed documentation.**
□ **Qualifying Remarks**

(4) Not rejecting W/MBE & SLBEs as being unqualified without justification based on a thorough investigation of their capabilities. The W/MBE & SLBEs standing within its industry, membership in specific groups, organizations / associations and political or social affiliations are not legitimate causes for rejecting or not soliciting bids to meet the goals.
□ **Not applicable.** □ **See attached justification for rejection of a subcontractor's bid or proposal.** □ **Qualifying Remarks**

(5) Made scope(s) of work available to W/MBE & SLBE subcontractors and suppliers; and, segmented portions of the work or material consistent with the available W/MBE & SLBE subcontractors and suppliers, to facilitate meeting the goal. □ **In addition, Sub-Contractors could bid on their own choice of work or trade without restriction to a pre-determined**

portion. □ **See enclosed comments.**□ **Qualifying Remarks**

(6) Made good faith efforts, despite the ability or desire of Bidder/Proposer to perform the sub-tasks of a contract with its own forces/organization. A Bidder/Proposer who desires to self-perform the sub-tasks of a contract must demonstrate good faith efforts if the goal has not been met. □ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self-performed by the prime.** □ **Qualifying Remarks w/Documents**

(7) Segmented the portions of the work to be performed by W/MBEs & SLBEs in order to increase the likelihood that the goals will be met. This includes, where appropriate, breaking out contract work items into economically feasible units (quantities/scale) to facilitate W/MBE & SLBE participation, even when the Bidder/Proposer might otherwise prefer to perform these work items with its own forces. □ **Sub-Contractors could bid on their own choice of work or trade without restriction to a pre- determined portion.**□ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self- performed by the prime.** □ **See enclosed comments.**□ **Qualifying Remarks**

(8) Made efforts to assist interested W/MBEs & SLBEs in obtaining bonding, lines of credit, or insurance as required by the City or contractor.
□ **See enclosed documentation on initiatives undertaken and methods to accomplish.** □ **Qualifying Remarks**

(9) Made efforts to assist interested W/MBEs & SLBEs in obtaining necessary equipment, supplies, materials, or related assistance or services, including participation in an acceptable mentor-protégé program. □ **See enclosed documentation of initiatives and/or agreements.** □ **Qualifying Remarks**

(10) Effectively used the services of the City and other organizations that provide assistance in the recruitment and placement of W/MBEs & SLBEs.
□ **See enclosed documentation of services engaged.** □ **Overview (attached) of tactical actions and resources employed toward recruitment**

Note: Any unsolicited information in support of your Bid/RFP Compliance must accompany your submittal. □ **Identify Information Submitted**

Participation Plan: Guidance for Complying with Good Faith Efforts Outreach (page 3 of 3)

(1) All firms on the W/MBE & SLBE Goal Setting List must be solicited and documentation provided for email, fax,letters, phone calls, and other methods of outreach/communication with the listed firms. The DMI Solicited and DMI-Utilized forms must be completed for all firms solicited and all firms utilized. Other opportunities for subcontracting should be explored to attain participation. May consult Tampa EBO Office and/or researching the on-line Diversity Management Business System Directory for Tampa certified W/MBE & SLBEfirms.

(2) Solicitation of W/MBE & SLBEs, via written or electronic notification, should provide specific information on the services needed, where plans can be reviewed and assistance offered in obtaining these, if required. Solicitations should be sent a minimum of a week (i.e. 5 city business days or more) before the bid/proposal date. Actual copies of the bidder's solicitation containing their scope-specific instructions should be provided.

(3) With any quotes received, a follow-up should be made when needed to confirm detail scope of work. For anyW/MBE & SLBE low quotes rejected, an explanation shall be provided detailing negotiation efforts.

(4) If a low bid W/MBE & SLBE is rejected or deemed unqualified the contractor must provide an explanation and supporting documentation for this decision.

(5) Prime shall break down portions of work into economical feasible opportunities for subcontracting. The W/MBE & SLBE directory may be useful in identifying additional subcontracting opportunities and certified firms not listed in the "W/MBE & SLBE Goal Setting Firms Contact List."

(6) Contractor shall not preclude W/MBE & SLBEs from bidding on any part of work, even if the Contractor may desire to self-perform aspects of the work.

(7) Contractor shall avoid relying solely on subcontracting those scopes of work where W/MBE & SLBE availabilityis not sufficient to attain pre-determined goals; including RFP/RFQ solicitations, all of which require GFECPcompliance to achieve sub-consultant participation.

(8) In its solicitations, the Bidder should offer assistance to W/MBE & SLBEs in obtaining bonding, insurance, et cetera, if required of subcontractors by the City or Prime Contractor.

(9) In its solicitation, the Bidder should offer assistance in obtaining equipment for a specific job to W/MBE & SLBEs, if needed. This includes mobilization where applicable.

(10) Contractor should use the services offered by such agencies as the Small Business Development Center (SBDC) @ University South Fla.; SBDC @ Hillsborough County Entrepreneur Collaborative Center; Hillsborough NAACP Empowerment Center; Hillsborough County Economic Development Department DM/DWBE/SBE Program and Prospera-Hispanic Business Assoc. to name a few for the recruitment and placement of available WMBEs/SLBEs.

City of Tampa

Page 1 of 2 –DMI Payment
City of Tampa – DMI Sub-(Contractors/Consultants/Suppliers) Payments
(FORM MBD-30)

[ ] Partial [ ] Final

Contract No.: 21-P-00417 WO#,(if any): _____ Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

Contractor Name: Advanced Recreational Concepts Address: 3127 Skyway Cir Unit 101 Melbourne FL 32934

Federal ID: 20-0520823 Phone: 321-775-0600 Fax: _____ Email: INFO@ARCFLORIDA.COM

GC Pay Period: _____ Payment Request/Invoice Number: _____ City Department: _____

Total Amount Requested for pay period: $_____ Total Contract Amount (including change orders):$_____

-Type of Ownership - (F=Female M=Male), BF BM = African Am., HF HM = Hispanic Am., AF AM = Asian Am., NF NM = Native Am., CF CM = Caucasian S = SLBE

Type Trade/Work Activity []Sub []Supplier Federal ID	Company Name Address Phone & Fax	Total Sub Contract Or PO Amount	Amount Paid To Date Amount Pending Previously Reported	Amount To Be Paid For This Period Sub Pay Period Ending Date
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$

(Modifying This Form or Failure to Complete and Sign May Result in Non-Compliance)

Certification: I hereby certify that the above information is a true and accurate account of payments to sub – contractors/consultants on this contract.

Signed: Paul Bickham Name/Title: Owner Date: 9.17.2024

DMI form 30 (rev. 01/15/2020)

Note: Detailed Instructions for completing this form are on the next page

Instructions for completing The DMI Sub-(Contractors/Consultants/ Suppliers) Payment Form (Form MBD-30)

This form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the pay period. If applicable, after payment has been made to the subcontractor, "Waiver and Release of Lien upon Progress Payment", "Affidavit of Contractor in Connection with Final Payment", or an affidavit of payment must be submitted with the amount paid for the pay period. The following will detail what data is required for this form. The instructions that follow correspond to the headings on the form required to be completed. **(Modifying or omitted information from this form my result in non-compliance).**

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **W.O.#** If the report covers a work order number (W.O.#) for the contract, please indicate it in that space.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business.
- **Address.** The physical address of your business.
- **Federal ID.** A number assigned to a business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **Pay Period.** Provide start and finish dates for pay period. (e.g. 05/01/13 – 05/31/13)
- **Payment Request/Invoice Number.** Provide sequence number for payment requests. (ex. Payment one, write 1 in space, payment three, write 3 in space provided.)
- **City Department**. The City of Tampa department to which the contract pertains.
- **Total Amount Requested for pay period.** Provide all dollars you are expecting to receive for the pay period.
- **Total Contract Amount (including change orders).** Provide expected total contract amount. This includes any change orders that may increase or decrease the original contract amount.
- **Signed/Name/Title/Date**. This is your certification that the information provided on the form is accurate.
- **See attached documents.** Check if you have provided any additional documentation relating to the payment data. Located at the bottom middle of the form.
- **Partial Payment.** Check if the payment period is a partial payment, not a final payment. Located at the top right of the form.
- **Final Payment.** Check of this period is the final payment period. Located at the top right of the form.

The following instructions are for information of any and all subcontractors used for the pay period.

- **(Type) of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business or SLBE.
- **Trade/Work Activity.** Indicate the trade, service, or material provided by the subcontractor.
- **SubContractor/SubConsultant/Supplier.** Please indicate status of firm on this contract.
- **Federal ID.** A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **Company Name, Address, Phone & Fax.** Provide company information for verification of payments.
- **Total Subcontract Amount.** Provide total amount of subcontract for subcontractor including change orders.
- **Amount Paid To Date.** Indicate all dollars paid to date for the subcontractor.
- **Amount Pending, Previously Reported.** Indicate any amount previously reported that payments are pending.
- **Amount To Be Paid for this Period.** Provide dollar amount of dollars requested for the pay period.
- **Sub Pay Period Ending Date.** Provide date for which subcontractor invoiced performed work.

Forms must be signed and dated or will be considered incomplete. The company authorized representative must sign and certify the information is true and accurate. Failure to sign this document or return the document unsigned can be cause for determining a company is in non-compliance of Ordinance 2008-89.

If any additional information is required or you have any questions, you may call the Office of Equal Business Opportunity at (813) 274-5522.

AFFIDAVIT OF COMPLIANCE WITH FOREIGN COUNTRIES OF CONCERN PURSUANT TO SECTION 287.138, FLORIDA STATUTES, CONVICTED VENDOR LIST (PUBLIC ENTITY CRIME) PURSUANT TO SECTION 287.133, FLORIDA STATUTES, PROHIBITION AGAINST CONTRACTING WITH SCRUTINIZED COMPANIES PURSUANT TO SECTION 287.135, FLORIDA STATUTES, PROHIBITION AGAINST HUMAN TRAFFICKING PURSUANT TO SECTION 787.06, FLORIDA STATUTES, AND COMPLIANCE WITH E-VERIFY PURSUANT TO SECTION 448.095, FLORIDA STATUTES

The undersigned Affiant, on behalf of the Entity listed below ("Entity"), hereby attests under penalty of perjury as follows:

Public Entity Crimes

1. Affiant understands that a "person" or "affiliate" who has been placed on the "convicted vendor list" following a "conviction" for a "public entity crime" (as those terms are defined in Section 287.133, Florida Statutes) for a period of 36 months following the date of being placed on the convicted vendor list, is ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa. Entities placed on either the "discriminatory vendor list" or "antitrust vendor list" are ineligible to transact business with the City of Tampa.
2. Affiant understands and attests that neither Affiant, nor any person or affiliate of the Entity, nor the Entity have been placed on any of the above referenced vendor lists that would render the Entity ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa.

Scrutinized Companies

3. Affiant understands that pursuant to Section 287.135(2)(a), Florida Statutes, the Entity would be ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa if the Entity is on the "Scrutinized Companies that Boycott Israel List" (created pursuant to Section 215.4725, Florida Statutes) or is engaged in a boycott of Israel. If the value of the contract is one million dollars or more if, at the time of bidding on, submitting a proposal or reply for, or entering into or renewing a contract, the Entity:
    a. Is on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, created pursuant to Section 215.473, Florida Statutes; or
    b. Is engaged in business operations in Cuba or Syria.

4. Affiant attests that neither Affiant nor the Entity are on the Scrutinized Companies that Boycott Israel List, Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, nor are we engaged in a boycott of Israel, and understand that any resulting contract may be terminated for a falsification of this Affidavit.

E-Verify

5. Affiant understands and attests that pursuant to Section 448.095(5), Florida Statutes, the Entity must comply with Florida's E-Verify law to enter into a contract with the City of Tampa.
6. The undersigned Entity is registered with and uses the United States Department of Homeland Security's E-Verify system to verify the work authorization status of all new employees.
7. No public employer has terminated a contract with the Entity pursuant to Section 448.095(5), Florida Statutes, within the year immediately preceding the date of contracting or submitting a bid, proposal or replay to contract with the City of Tampa.
8. Entity is currently in compliance and will remain in compliance, for the duration of any contract with

the City of Tampa, with all requirements of Section 448.095(5), Florida Statutes.

9. Affiant understands and attests that, if there is a good faith belief that the Entity has knowingly violated Section 448.09(1), Florida Statutes, there is an obligation on the part of the City of Tampa to terminate a contract pursuant to Section 448.095(5), Florida Statutes.
10. Affiant understands and attests that, if there is a good faith belief that one of Entity's subcontractor(s) has knowingly violated the Section 448.09(1), Florida Statutes, but the Entity has otherwise complied with its obligations thereunder, then the Entity will be required to immediately terminate the contract with the subcontractor in order to continue providing services to the City of Tampa.

Anti-Human Trafficking

11. Affiant hereby understands and attests that the undersigned Entity does not use coercion of labor or services as those terms are defined in section 787.06(13), Florida Statutes.

Compliance with Foreign Countries of Concern

12. Affiant, on behalf of the Entity attest to the following:
    a. Entity is not owned by the government of a foreign country of concern as defined in Section 287.138, Florida Statutes. (Source: § 287.138(2)(a), Florida Statutes.)

    b. The government of a foreign country of concern does not have a controlling interest in Entity. (Source: § 287.138(2)(b), Florida Statutes.)

    c. Entity is not organized under the laws of, and does not have a principal place of business in a foreign country of concern. (Source: § 287.138(2)(c), Florida Statutes.)

The undersigned is authorized to execute this Affidavit on behalf of Entity.

The undersigned further sayeth naught.

Date: 9/16/2024

(Affiant) Signed: _____

Entity: Advance Recreation Concepts

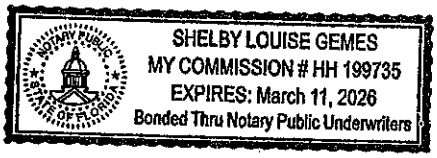
Name: Paul Bickham

Title: Owner

STATE OF Florida
COUNTY OF Brevard

SWORN to (or affirmed) and subscribed before me, by means of ☒ physical presence or ☐ online notarization, this 16 day of September, 2024 by Paul Bickham, as owner, who is personally known to me or who has produced _____ as identification.

[AFFIX NOTARY SEAL/STAMP]



Shelby Louise Gemes
Signature of Notary

Name: Shelby Louise Gemes
(Print or Type Name)

Notary Public: State of Florida
My Commission Expires 3/11/2026

#VDT8QQYV0D2EO7v1

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 02/08/2024

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	CONTACT NAME: Lilleigh Cashman
Tom Collins Insurance Agency, Inc. 1555 Indian River Blvd, Suite 130 Vero Beach, FL 32960	PHONE (A/C, No, Ext): (772)778-9222 FAX (A/C, No): (772)778-9255 E-MAIL ADDRESS: l.cashman@tomcollinsinsurance.com

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A:	Kinsale Insurance Company	38920
INSURER B:	Hartford Accident & Indemnity Company	22357
INSURER C:	Associated Industries Insurance Company	23140
INSURER D:		
INSURER E:		
INSURER F:		

INSURED
Play Space Services, Inc.
Advanced Recreational Concepts LLC.
3127 Skyway Circle Ste #101
Melbourne, FL 32934

COVERAGES **CERTIFICATE NUMBER: 99002176-10052932** **REVISION NUMBER: 19**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRO-JECT LOC OTHER:	Y	Y	0100280432-0	01/27/2024	01/27/2025	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$ $ $ $ $ $	1,000,000 100,000 Excluded 1,000,000 2,000,000 2,000,000
B	AUTOMOBILE LIABILITY X ANY AUTO OWNED AUTOS ONLY / SCHEDULED AUTOS HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY	Y	Y	21 UEC HV7562	02/03/2024	02/03/2025	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ $ $ $	1,000,000
A	UMBRELLA LIAB X OCCUR X EXCESS LIAB CLAIMS-MADE DED RETENTION $	Y	Y	0100280457-0	01/27/2024	01/27/2025	EACH OCCURRENCE AGGREGATE	$ $	2,000,000 2,000,000
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y / N: N If yes, describe under DESCRIPTION OF OPERATIONS below	N / A	Y	AWC1205025	03/07/2024	03/07/2025	X PER STATUTE / OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	$ $ $	1,000,000 1,000,000 1,000,000

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

City of Tampa, its elected officials, departments, officers, officials, employees and volunteers together with, as applicable, any associated lender of the City are included as Additional Insureds with respects to General Liability, Business Auto and Excess Liability policies on a Primary & Non-Contributory Basis as to liability arising out of work or operations performed by or on behalf of Firm including materials, parts, or equipment furnished in connection with such work or operations and automobiles owned, leased, hired or borrowed by or on behalf of Firm. Per policy forms CG20101219, CG20371219, CAS50030717 & HA99160312 (Forms Attached). Per written contract. Waiver of Subrogation is provided under the General Liability, Business
(continued on ACORD 101 Additional Remarks Schedule)

CERTIFICATE HOLDER

City of Tampa
Insurance Compliance
P.O. Box 10085-ZS
Duluth, GA 30096

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

(LMC)

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AGENCY CUSTOMER ID: 99002176

LOC #:

ACORD

ADDITIONAL REMARKS SCHEDULE

AGENCY	NAMED INSURED
Tom Collins Insurance Agency, Inc.	Play Space Services, Inc. Advanced Recreational Concepts LLC.
POLICY NUMBER N/A	
CARRIER Multiple Carriers / NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

(continued from Description of Operations)
Auto, Excess Liability and Workers Compensation policies for the City of Tampa, its elected officials, departments, officers, officials, employees and volunteers as required by written contract per policy forms CG24531219, HA99160312 & WC000313 (Forms Attached). The excess liability policy follows the additional insured and waiver of subrogation endorsements of the underlying general liability policy. 30 days written notice of any non-renewal, termination, material change or reduction in coverage with the exception of non payment which is 10 days.
Re: Various Parks and Recreation Projects

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From: Lilleigh Cashman SMTP:Lcashman@tomcollinsinsurance.com
To: CityofTampa CityofTampa@Ebix.com
CC: sbarton@arcflorida.com,s.purvis@tomcollinsinsurance.com
Subject: Advanced Recreational Concepts LLC. - Proof of Insurance
Date: 2/8/2024 5:40:53 AM
Attachment(s):

You don't often get email from Lcashman@tomcollinsinsurance.com. Learn why this is important

CAUTION: This email originated from outside of the organization! DO NOT click on links or open attachments unless you were expecting the email, recognize the sender, and know the content is safe.

Good morning,

Attached please find an updated Certificate of Insurance for the above referenced.

Should you need anything additional, do not hesitate to let me know.

With best regards,

Lilleigh Cashman
Commercial Lines Account Assistant
Tom Collins Insurance
1555 Indian River Blvd, Ste 130
Vero Beach, FL. 32960
Ph: 772-778-9222 Ext. 125
Fx: 772-778-9255



POLICY BIND / ALTER / CHANGE NOTICE
You cannot bind, alter or cancel coverage without speaking to an authorized representative of Tom Collins Insurance. Coverage cannot be assumed to be bound without confirmation from an authorized representative.

CONFIDENTIALITY NOTICE: The information contained in this communication, including attachments may contain privileged and confidential information that is intended only for the exclusive use of the addressee. If the reader of this message is not the intended recipient, or the employee or agent responsible for delivering it to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us by telephone immediately at 772-778-9222. Thank you.

City of Tampa
Jane Castor, Mayor

Purchasing Department
Deanna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E. Hanna Ave.
Tampa, Florida 33610
Office: (813) 274-8351
Fax: (813) 274-8355

M E M O R A N D U M

DATE: July 17, 2024

TO: Lisa Grizzle
Parks & Recreation Administrative Manager
Parks and Recreation

FROM: Theresa Samuel, Purchasing Technician

RE: **REQUEST FOR RENEWAL/RE-BID**

The award for **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421** provided by **BLISS PRODUCTS AND SERVICES, INC.** will expire on **JANUARY 12, 2025**. This award has a one-year renewal period. Per the terms of the contract, the vendor is entitled to request a **3.0%** escalation using the Consumer Price Index.

We are requesting information from you as to your needs relative to renewing the award for the above referenced goods. Please indicate your preference with an **(X)**, for one of the options listed below.

__x__ 1. You want to renew with the current vendor(s). ***Please attach to the Request for Renewal/Re-bid form an explanation as to why it is in the best interest of the Department to Re-new rather than Re-bid. Include a statement that the current pricing has been reviewed and remains fair and reasonable. The information that you provide will appear in the background section of the agenda request form that will appear before City Council. Please submit the MBD-30 payment form (if applicable) to this renewal. The MBD-30 form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the evaluation period.***

a.__x__ Please complete the attached **Vendor Performance Evaluation** form.

b._____ Please complete the attached **MBD-30 Sub-Contractor Payment** form **(if applicable for this renewal).**

	ESTIMATED EXPENDITURE	FUND	COST CENTER	ACCOUNT
FY_____	Controlled by Requisition			
FY_____				

(If funds are to be split between two fiscal years, please indicate the years and amounts)

____ 2. You do not want to renew with this vendor and would like to Re-bid. **Please provide an explanation:**

_____

_____

____ 3.You do not want to renew or re-bid at this time. (Let contract expire).

Please return this document and the requested information to my office by **July 23, 2024,** in order that we may process your request in a timely manner.

Dept. Contact Name (Printed): _Danielle Riffenburg_____ **Signature:** _____ **Date:** _____

Please fax to 813-274-8355 or email to theresa.samuel@tampagov.net

VENDOR PERFORMANCE EVALUATION

Name of Vendor Reviewed:	BLISS PRODUCTS AND SERVICES, INC.	
Contract Name & Number:	PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421	
Rating Period	**From: 1/13/24**	**To: Present**

	Place an X for your selection	**Excellent**	**Satisfactory**	**Unsatisfactory**
Delivery/Service completed when required:	Delivered/Service as ordered and to spec?		x	
	Timeliness of Product/Service		x	
	Quality of Product/Service		x	
	Delivery of Products/ Complete/ Undamaged?		X	

Please Describe Quality of Product or Service: Products delivered are as expected, with good follow-up for any concerns or warranty items.

Customer Satisfaction	Communication (Phone, E-Mail, or Fax availability)?		x	
	Responsiveness and proper follow up regarding any contractual or performance issues?		x	
	Product or Services fulfilled/completed		x	

Have you discussed issues with vendor? _____ Yes __x__ No

Would you like to request a meeting with Purchasing & Vendor? _____Yes _____ No

Performance during rating period: Vendor is responsive and provides quality products.

Customer Service Comments: Customer service is as expected.

Dept. Contact Name (Printed): Danielle Riffenburg **Signature:** Danielle Riffenburg Digitally signed by Danielle Riffenburg Date: 2024.08.29 15:26:00 -04'00'

Rev: 4/20/11

PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

BLISS PRODUCTS AND SERVICES, INC.

Parks and Recreation believes it is in the best interest of the City to renew the contract for Bid #31041421 with BLISS PRODUCTS AND SERVICES, INC. Maintaining the current contract will allow for efficient maintenance and repair of existing and new equipment installed under this contract. The current pricing has been reviewed and remains fair and reasonable.

City of Tampa
Jane Castor, Mayor

Purchasing Department
DeAnna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E Hanna Avenue
Tampa, Florida 33610

Office (813) 274-8351
Fax: (813) 274-8355

September 12, 2024

Gregg Bliss
Bliss Products and Services, Inc.
6831 S. Sweetwater Rd.
Lithia Springs, GA 30122
info@blissproducts.com

Dear Mr. Bliss:

Your firm has an award with the City of Tampa to provide **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421**

This existing award expires on **JANUARY 12, 2025**. Under the provisions of this award, terms and conditions may be renewed if mutually agreeable to both parties for an additional **one-year** period.

If your firm desires to renew the award, please complete and return the following:

- Statement of Intent
- Form MBD10 – "Schedule of All Sub-Contractors/Consultants/Suppliers Solicited"
- Form MBD20 – "Schedule of Sub-Contractors/Consultants/Suppliers to be Utilized"
- Form MBD50 – "Good Faith Effort Compliance Plan (GFECP) Guidelines"
- Form MBD30 – "Sub-Contractors/Consultant/Suppliers Payments"
- Affidavit of Compliance:
    - FS287.138 Compliance with Foreign Countries of Concern
    - FS287.133 Convicted Vendor List (Public Entity Crimes)
    - FS287.135 Prohibition Against Contracting with Scrutinized Companies
    - FS787.06 Prohibition Against Human Trafficking
    - FS448.095 Compliance With E-Verify

If your firm desires to renew the award, please complete and return the above listed documents. The MBD forms should document any subcontractors that are going to be used to provide goods/services for the award's renewal period and/or if any request for payments has been submitted. If payments were not requested or subcontractors were not used, please mark each form accordingly. **All documents must be submitted for the award/contract to be renewed.**

If you do not wish to renew, please indicate so on the attached Statement of Intent.

Sincerely,

Theresa Samuel
Purchasing Technician
(813) 274-8635
theresa.samuel@tampagov.net

STATEMENT OF INTENT

I, Gregg Bliss,

being authorized to contract for Bliss Products and Services, Inc., do hereby express the firm's desire to renew the above referenced agreement upon the same prices, same terms and conditions. I understand that an extension of the agreement requires the City's approval. This statement represents the above firm's binding approval of an extension of this agreement.

By: Gregg Bl — 10/31/24

Authorized Signature — Date

Gregg Bliss

Type or Print Name Above

Title: President

Comments:

( ) We do not wish to renew this award. The source for non-renewal is:

By: _____ _____

Authorized Signature — Date

_____

Type or Print Name Above

Title: _____

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-10)

Contract No.: 21-P-00417 Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING INSTALLATION

Company Name: Bliss Products and Services, Inc. Address: 6831 S. Sweetwater rd. Lithia Springs, GA

Federal ID: 59-2413631 Phone: 800-248-2547 Fax: 866-920-1915 Email: info@blissproducts.com

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.

☑ **No Firms were contacted or solicited for this contract.**

☑ **No Firms were contacted because:** Materials only and/or installers are TBD upon project award

☐ **See attached list of additional Firms solicited and all supplemental information (List must comply to this form)**

Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=W/MBE O = Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub-contracting opportunities on this contract.

Signed: [signature] Name/Title: Gregg Bliss, President Date: 10/31/24

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

Page 2 of 4 – DMI Solicited/Utilized

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) Solicited Form (Form MBD-10)

This form must be submitted with all bids or proposals. **All** subcontractors (regardless of ownership or size) solicited and subcontractors from whom unsolicited quotations were received must be included on this form. The instructions that follow correspond to the headings on the form required to be completed. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Firms were contacted or solicited for this contract.** Checking the box indicates that a pre-determined Subcontract Goal or Participation Plan Requirement was not set by the City resulting in your business not using subcontractors and will self-perform all work. If during the performance of the contract you employ subcontractors, the City must pre-approve subcontractors. Use of the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: Certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors.
- **No Firms were contacted because.** Provide brief explanation why no firms were contacted or solicited.
- **See attached documents.** Check box, if after you have completed the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the form. All DMI data not submitted on the MBD Form-10 must be in the same format and have all requested data from MBD Form-10 included.

The following instructions are for information of any and all subcontractors solicited.

- **"S" = SLBE, "W" = W/MBE.** Enter **"S"** for firms Certified by the City as Small Local Business Enterprises and/or **"W"** for firms Certified by the City as either Women/Minority Business Enterprise; **"O" = Non-certified others**.
- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification and payment of the contractor/subcontractor.
- **Company Name, Address, Phone & Fax.** Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials** indicate the trade, service, or materials provided by the subcontractor. NIGP codes aka "National Institute of Governmental Purchasing" are listed at top section of document.
- **Contact Method L=letter, F=fax, E=Email, P=Phone.** Indicate with letter the method(s) of soliciting for bid.
- **Quote or Resp. (response) Rec'd (received) Y/N.** Indicate "Y" Yes if you received a quotation or if you received a response to your solicitation. Indicate "N" No if you received no response to your solicitation from the subcontractor. Must keep records: log, ledger, documentation, etc. that can validate/verify.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Page 3 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.: 21-P-00417 Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING INSTALLATION

Company Name: Bliss Products and Services, Inc. Address: 6831 S. Sweetwater Rd. Lithia Springs, GA

Federal ID: 59-2413631 Phone: 800-248-2547 Fax: 866-920-1915 Email: info@blissproducts.com

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

☐ **See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)**

Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

☐ **No Subcontracting/consulting (of any kind) will be performed on this contract.**

☑ **No Firms are listed to be utilized because:** firms are contacted per project basis

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=W/MBE O =Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %

Total ALL Subcontract / Supplier Utilization $_____

Total SLBE Utilization $ _____

Total W/MBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. _____% Percent W/MBE Utilization of Total Bid/Proposal Amt. _____%

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: _____ Name/Title: Gregg Bliss, President Date: 10/31/24

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive Forms must be included with Bid / Proposal

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) to be Utilized Form (Form MBD-20)

This form must be submitted with all bids or proposals. All subcontractors (regardless of ownership or size) projected to be utilized must be included on this form. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

Contract No. This is the number assigned by the City of Tampa for the bid or proposal.

- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Subcontracting/consulting (of any kind) will be performed on this contract.** Checking box indicates your business will not use subcontractors when no Subcontract Goal or Participation Plan Requirement was set by the City, but will self-perform all work. When subcontractors are utilized during the performance of the contract, the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors, including completion and submitting Form-10 and Form-20.
- **No Firms listed To-Be-Utilized.** Check box; provide brief explanation why no firms were retained when a goal or participation plan requirement was set on the contract. **Note: Mandatory compliance with Good Faith Effort outreach (GFECP) requirements applies (MBD Form-50) and supporting documentation must accompany the bid.**
- **See attached documents.** Check box, if after completing the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the scope/value/percent utilization of subcontractors. Reproduce copies of MBD-20 and attach. All data not submitted on duplicate forms must be in the same format and content as specified in these instructions.

The following instructions are for information of Any and All subcontractors To Be Utilized.

- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **"S" = SLBE, "W" = W/MBE.** Enter **"S"** for firms Certified by the City as Small Local Business Enterprises and/or **"W"** for firms Certified by the City as Women/Minority Business Enterprise; **"O" = Non-certified others**.
- **Company Name, Address, Phone & Fax.** Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials (NIGP code if Known)** Indicate the trade, service, or material provided by the subcontractor. Abbreviated list of NIGP is available at http:/www.tampagov.net/mbd "Information Resources".
- **Amount of Quote, Letters of Intent** (required for both SLBEs and W/MBEs).
- **Percent of Work/Contract.** Indicate the percent of the total contract price the subcontract(s) represent. For CCNA only (i.e. Consultant A/E Services) you must indicate subcontracts as percent of total scope/contract.
- **Total Subcontract/Supplier Utilization.** – Provide total dollar amount of all subcontractors/suppliers projected to be used for the contract. (Dollar amounts may be optional in CCNA depending on solicitation format).
- **Total SLBE Utilization.** Provide total dollar amount for all projected SLBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Total W/MBE Utilization.** Provide total dollar amount for all projected W/MBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Percent SLBE Utilization.** Total amount allocated to SLBEs divided by the total bid/proposal amount.
- **Percent W/MBE Utilization.** Total amount allocated to W/MBEs divided by the total bid/proposal amount.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign, and Submit all Forms 10,20, & 50 SHALL render the Bid or Proposal Non-Responsive

Good Faith Effort Compliance Plan (GFECP) Guidelines

for Women/Minority Business Enterprise\Small Local Business Enterprise ParticipationCity of Tampa - Equal Business Opportunity Program

(Form MBD 50 – See detailed instructions on page 3 of 3)

Contract Name PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT Bid Date _____

Bidder/Proposer Bliss Products and Services, Inc.

Signature _____ Date 10/31/24

Name Gregg Bliss Title President

The Compliance Plan with attachments is a true account of Good Faith Efforts (GFE) made to achieve the participation goals as specified for Women/Minority Business Enterprises & Small Local Business Enterprises (W/MBE & SLBE) on the referenced contract:

☑ **W/MBE & SLBE participation Goal is Not Specified for this Solicitation however participation is aspirational and GFECP is required.**

☐ **W/MBE & SLBE participation Goal is Met or Exceeded (refer to Goal-Set Form MBD-90).**

☐ **W/MBE & SLBE participation Goal is Not Fully Achieved (refer to Goal-Set Form MBD-90).**

For each checkbox above Bidders/Proposers shall submit DMI Forms 10 and 20 which accurately report all subcontractors solicited and all subcontractors to-be-utilized. The following list is an overview of the required baseline GFECP action steps for all bids/proposals. Furthermore, it is understood that these GFECP requirements are weighted in the compliance evaluation based on the veracity and demonstrable degree of documentation provided with the bid/proposal:

(Check applicable boxes below - Must enclose supporting documents accordingly with Qualifying Remarks)

(1) Solicited through reasonable and available means the interest of W/MBE & SLBEs that have the capability to perform the work of the contract. The Bidder or Proposer must solicit this interest within enough time to allow the W/MBE & SLBEs to respond. The Bidder or Proposer must take appropriate steps to follow up initial solicitations with interested W/MBE & SLBEs. ☐ **See DMI report forms for subcontractors solicited.** ☐ **See enclosed supplemental data on solicitation efforts.**

☐ **Qualifying Remarks**

(2) Provided interested W/MBE & SLBEs with adequate, specific scope information about the plans, specifications, and requirements of the contract, including addenda, in a timely manner to assist them in responding to the requested scope identified by bidder/proposer for the solicitation. ☐ **See enclosed actual solicitations used.**
☐ **Qualifying Remarks**

(3) Negotiated in good faith with interested W/MBE & SLBEs that have submitted bids (e.g. adjusted quantities or scale). Documentation of negotiation must include the names, addresses, and telephone numbers of W/MBE & SLBEs that were solicited; the date of each such solicitation; a description of the information provided regarding the plans and specifications for the work selected for subcontracting; and evidence as to why agreements could not be reached with W/MBE & SLBEs to perform the work. Additional costs involved in soliciting and using subcontractors is not a sufficient reason for a bidder/proposer's failure to meet goals or achieve participation, as long as such costs are reasonable. Bidders are not required to accept excessive quotes in order to meet the goal.
☐ **DMI Utilized Forms for sub-(contractor/consultant) reflect genuine negotiations** ☐ **This project is an RFQ/RFP in nature and negotiationsare limited to clarifications of scope/percentages, specifications, qualifications and subs fee schedules.**
☐ **See enclosed documentation.**
☐ **Qualifying Remarks**

(4) Not rejecting W/MBE & SLBEs as being unqualified without justification based on a thorough investigation of their capabilities. The W/MBE & SLBEs standing within its industry, membership in specific groups, organizations / associations and political or social affiliations are not legitimate causes for rejecting or not soliciting bids to meet the goals.
☐ **Not applicable.** ☐ **See attached justification for rejection of a subcontractor's bid or proposal.** ☐ **Qualifying Remarks**

(5) Made scope(s) of work available to W/MBE & SLBE subcontractors and suppliers; and, segmented portions of the work or material consistent with the available W/MBE & SLBE subcontractors and suppliers, to facilitate meeting the goal. ☐ **In addition, Sub-Contractors could bid on their own choice of work or trade without restriction to a pre-determined**

portion. □ **See enclosed comments.**□ **Qualifying Remarks**

(6) Made good faith efforts, despite the ability or desire of Bidder/Proposer to perform the sub-tasks of a contract with its own forces/organization. A Bidder/Proposer who desires to self-perform the sub-tasks of a contract must demonstrate good faith efforts if the goal has not been met. □ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self-performed by the prime.** □ **Qualifying Remarks w/Documents**

(7) Segmented the portions of the work to be performed by W/MBEs & SLBEs in order to increase the likelihood that the goals will be met. This includes, where appropriate, breaking out contract work items into economically feasible units (quantities/scale) to facilitate W/MBE & SLBE participation, even when the Bidder/Proposer might otherwise prefer to perform these work items with its own forces. □ **Sub-Contractors could bid on their own choice of work or trade without restriction to a pre- determined portion.**□ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self- performed by the prime.** □ **See enclosed comments.**□ **Qualifying Remarks**

(8) Made efforts to assist interested W/MBEs & SLBEs in obtaining bonding, lines of credit, or insurance as required by the City or contractor.
□ **See enclosed documentation on initiatives undertaken and methods to accomplish.** □ **Qualifying Remarks**

(9) Made efforts to assist interested W/MBEs & SLBEs in obtaining necessary equipment, supplies, materials, or related assistance or services, including participation in an acceptable mentor-protégé program. □ **See enclosed documentation of initiatives and/or agreements.** □ **Qualifying Remarks**

(10) Effectively used the services of the City and other organizations that provide assistance in the recruitment and placement of W/MBEs & SLBEs.
□ **See enclosed documentation of services engaged.** □ **Overview (attached) of tactical actions and resources employed toward recruitment**

Note: Any unsolicited information in support of your Bid/RFP Compliance must accompany your submittal. □ **Identify Information Submitted**

Participation Plan: Guidance for Complying with Good Faith Efforts Outreach (page 3 of 3)

(1) All firms on the W/MBE & SLBE Goal Setting List must be solicited and documentation provided for email, fax,letters, phone calls, and other methods of outreach/communication with the listed firms. The DMI Solicited and DMI-Utilized forms must be completed for all firms solicited and all firms utilized. Other opportunities for subcontracting should be explored to attain participation. May consult Tampa EBO Office and/or researching the on-line Diversity Management Business System Directory for Tampa certified W/MBE & SLBEfirms.

(2) Solicitation of W/MBE & SLBEs, via written or electronic notification, should provide specific information on the services needed, where plans can be reviewed and assistance offered in obtaining these, if required. Solicitations should be sent a minimum of a week (i.e. 5 city business days or more) before the bid/proposal date. Actual copies of the bidder's solicitation containing their scope-specific instructions should be provided.

(3) With any quotes received, a follow-up should be made when needed to confirm detail scope of work. For anyW/MBE & SLBE low quotes rejected, an explanation shall be provided detailing negotiation efforts.

(4) If a low bid W/MBE & SLBE is rejected or deemed unqualified the contractor must provide an explanation and supporting documentation for this decision.

(5) Prime shall break down portions of work into economical feasible opportunities for subcontracting. The W/MBE & SLBE directory may be useful in identifying additional subcontracting opportunities and certified firms not listed in the "W/MBE & SLBE Goal Setting Firms Contact List."

(6) Contractor shall not preclude W/MBE & SLBEs from bidding on any part of work, even if the Contractor may desire to self-perform aspects of the work.

(7) Contractor shall avoid relying solely on subcontracting those scopes of work where W/MBE & SLBE availabilityis not sufficient to attain pre-determined goals; including RFP/RFQ solicitations, all of which require GFECPcompliance to achieve sub-consultant participation.

(8) In its solicitations, the Bidder should offer assistance to W/MBE & SLBEs in obtaining bonding, insurance, et cetera, if required of subcontractors by the City or Prime Contractor.

(9) In its solicitation, the Bidder should offer assistance in obtaining equipment for a specific job to W/MBE & SLBEs, if needed. This includes mobilization where applicable.

(10) Contractor should use the services offered by such agencies as the Small Business Development Center (SBDC) @ University South Fla.; SBDC @ Hillsborough County Entrepreneur Collaborative Center; Hillsborough NAACP Empowerment Center; Hillsborough County Economic Development Department DM/DWBE/SBE Program and Prospera-Hispanic Business Assoc. to name a few for the recruitment and placement of available WMBEs/SLBEs.

NOT APPLICABLE

Page 1 of 2 –DMI Payment
City of Tampa – DMI Sub-(Contractors/Consultants/Suppliers) Payments
(FORM MBD-30)

[ ] Partial [ ] Final
Contract No.: 21-P-00417 WO#,(if any):_____ Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND
Contractor Name:_____ Address:_____
Federal ID:_____ Phone:_____ Fax:_____ Email:_____
GC Pay Period:_____ Payment Request/Invoice Number:_____ City Department:_____

Total Amount Requested for pay period: $_____ Total Contract Amount (including change orders):$_____
-Type of Ownership - (F=Female M=Male), BF BM = African Am., HF HM = Hispanic Am., AF AM = Asian Am., NF NM = Native Am., CF CM = Caucasian S = SLBE

Type Trade/Work Activity []Sub []Supplier Federal ID	Company Name Address Phone & Fax	Total Sub Contract Or PO Amount	Amount Paid To Date Amount Pending Previously Reported	Amount To Be Paid For This Period Sub Pay Period Ending Date
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$

(Modifying This Form or Failure to Complete and Sign May Result in Non-Compliance)

Certification: I hereby certify that the above information is a true and accurate account of payments to sub – contractors/consultants on this contract.

Signed:_____ Name/Title: President Date: 10/31/2024

DMI form 30 (rev. 01/15/2020)

Note: Detailed Instructions for completing this form are on the next page

Page 2 of 2 – DMI Payment

Instructions for completing The DMI Sub-(Contractors/Consultants/ Suppliers) Payment Form (Form MBD-30)

This form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the pay period. If applicable, after payment has been made to the subcontractor, "Waiver and Release of Lien upon Progress Payment", "Affidavit of Contractor in Connection with Final Payment", or an affidavit of payment must be submitted with the amount paid for the pay period. The following will detail what data is required for this form. The instructions that follow correspond to the headings on the form required to be completed. **(Modifying or omitted information from this form my result in non-compliance).**

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **W.O.#** If the report covers a work order number (W.O.#) for the contract, please indicate it in that space.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business.
- **Address.** The physical address of your business.
- **Federal ID.** A number assigned to a business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **Pay Period.** Provide start and finish dates for pay period. (e.g. 05/01/13 – 05/31/13)
- **Payment Request/Invoice Number.** Provide sequence number for payment requests. (ex. Payment one, write 1 in space, payment three, write 3 in space provided.)
- **City Department**. The City of Tampa department to which the contract pertains.
- **Total Amount Requested for pay period.** Provide all dollars you are expecting to receive for the pay period.
- **Total Contract Amount (including change orders).** Provide expected total contract amount. This includes any change orders that may increase or decrease the original contract amount.
- **Signed/Name/Title/Date**. This is your certification that the information provided on the form is accurate.
- **See attached documents.** Check if you have provided any additional documentation relating to the payment data. Located at the bottom middle of the form.
- **Partial Payment.** Check if the payment period is a partial payment, not a final payment. Located at the top right of the form.
- **Final Payment.** Check of this period is the final payment period. Located at the top right of the form.

The following instructions are for information of any and all subcontractors used for the pay period.

- **(Type) of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business or SLBE.
- **Trade/Work Activity.** Indicate the trade, service, or material provided by the subcontractor.
- **SubContractor/SubConsultant/Supplier.** Please indicate status of firm on this contract.
- **Federal ID.** A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Total Subcontract Amount.** Provide total amount of subcontract for subcontractor including change orders.
- **Amount Paid To Date.** Indicate all dollars paid to date for the subcontractor.
- **Amount Pending, Previously Reported.** Indicate any amount previously reported that payments are pending.
- **Amount To Be Paid for this Period.** Provide dollar amount of dollars requested for the pay period.
- **Sub Pay Period Ending Date.** Provide date for which subcontractor invoiced performed work.

Forms must be signed and dated or will be considered incomplete. The company authorized representative must sign and certify the information is true and accurate. Failure to sign this document or return the document unsigned can be cause for determining a company is in non-compliance of Ordinance 2008-89.

If any additional information is required or you have any questions, you may call the Office of Equal Business Opportunity at (813) 274-5522.

AFFIDAVIT OF COMPLIANCE WITH FOREIGN COUNTRIES OF CONCERN PURSUANT TO SECTION 287.138, FLORIDA STATUTES, CONVICTED VENDOR LIST (PUBLIC ENTITY CRIME) PURSUANT TO SECTION 287.133, FLORIDA STATUTES, PROHIBITION AGAINST CONTRACTING WITH SCRUTINIZED COMPANIES PURSUANT TO SECTION 287.135, FLORIDA STATUTES, PROHIBITION AGAINST HUMAN TRAFFICKING PURSUANT TO SECTION 787.06, FLORIDA STATUTES, AND COMPLIANCE WITH E-VERIFY PURSUANT TO SECTION 448.095, FLORIDA STATUTES

The undersigned Affiant, on behalf of the Entity listed below ("Entity"), hereby attests under penalty of perjury as follows:

Public Entity Crimes

1. Affiant understands that a "person" or "affiliate" who has been placed on the "convicted vendor list" following a "conviction" for a "public entity crime" (as those terms are defined in Section 287.133, Florida Statutes) for a period of 36 months following the date of being placed on the convicted vendor list, is ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa. Entities placed on either the "discriminatory vendor list" or "antitrust vendor list" are ineligible to transact business with the City of Tampa.
2. Affiant understands and attests that neither Affiant, nor any person or affiliate of the Entity, nor the Entity have been placed on any of the above referenced vendor lists that would render the Entity ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa.

Scrutinized Companies

3. Affiant understands that pursuant to Section 287.135(2)(a), Florida Statutes, the Entity would be ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa if the Entity is on the "Scrutinized Companies that Boycott Israel List" (created pursuant to Section 215.4725, Florida Statutes) or is engaged in a boycott of Israel. If the value of the contract is one million dollars or more if, at the time of bidding on, submitting a proposal or reply for, or entering into or renewing a contract, the Entity:
    a. Is on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, created pursuant to Section 215.473, Florida Statutes; or
    b. Is engaged in business operations in Cuba or Syria.

4. Affiant attests that neither Affiant nor the Entity are on the Scrutinized Companies that Boycott Israel List, Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, nor are we engaged in a boycott of Israel, and understand that any resulting contract may be terminated for a falsification of this Affidavit.

E-Verify

5. Affiant understands and attests that pursuant to Section 448.095(5), Florida Statutes, the Entity must comply with Florida's E-Verify law to enter into a contract with the City of Tampa.
6. The undersigned Entity is registered with and uses the United States Department of Homeland Security's E-Verify system to verify the work authorization status of all new employees.
7. No public employer has terminated a contract with the Entity pursuant to Section 448.095(5), Florida Statutes, within the year immediately preceding the date of contracting or submitting a bid, proposal or replay to contract with the City of Tampa.
8. Entity is currently in compliance and will remain in compliance, for the duration of any contract with

the City of Tampa, with all requirements of Section 448.095(5), Florida Statutes.

9. Affiant understands and attests that, if there is a good faith belief that the Entity has knowingly violated Section 448.09(1), Florida Statutes, there is an obligation on the part of the City of Tampa to terminate a contract pursuant to Section 448.095(5), Florida Statutes.
10. Affiant understands and attests that, if there is a good faith belief that one of Entity's subcontractor(s) has knowingly violated the Section 448.09(1), Florida Statutes, but the Entity has otherwise complied with its obligations thereunder, then the Entity will be required to immediately terminate the contract with the subcontractor in order to continue providing services to the City of Tampa.

Anti-Human Trafficking

11. Affiant hereby understands and attests that the undersigned Entity does not use coercion of labor or services as those terms are defined in section 787.06(13), Florida Statutes.

Compliance with Foreign Countries of Concern

12. Affiant, on behalf of the Entity attest to the following:
    a. Entity is not owned by the government of a foreign country of concern as defined in Section 287.138, Florida Statutes. (Source: § 287.138(2)(a), Florida Statutes.)

    b. The government of a foreign country of concern does not have a controlling interest in Entity. (Source: § 287.138(2)(b), Florida Statutes.)

    c. Entity is not organized under the laws of, and does not have a principal place of business in a foreign country of concern. (Source: § 287.138(2)(c), Florida Statutes.)

The undersigned is authorized to execute this Affidavit on behalf of Entity.

The undersigned further sayeth naught.

Date: 10/31/24 (Affiant) Signed: Gregg Bliss

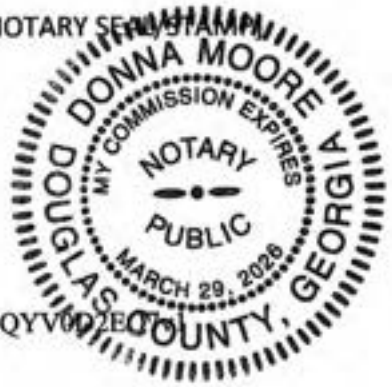
Entity: Bliss Products and Services, Inc Name: Gregg Bliss

Title: President

STATE OF Georgia
COUNTY OF Douglas

SWORN to (or affirmed) and subscribed before me, by means of ☒ physical presence or ☐ online notarization, this 31 day of OCT, 2024 by Gregg Bliss, as President, who is personally known to me or who has produced _____ as identification.

[AFFIX NOTARY SEAL/STAMP]



#VDT8QQYV0D2EC

Donna Moore
Signature of Notary
Name: Donna Moore
(Print or Type Name)
Notary Public: State of Florida
My Commission Expires 3/29/26

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 7/16/2024

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
HDINS,Inc dba Harry Daniel Insurance
P.O. 2077
Cartersville, GA 30120

www.hdins.com AYP070759

INSURED
Bliss Products and Services, Inc.
6831 S. Sweetwater Rd.
Lithia Springs GA 30122

CONTACT NAME: Meg Stover
PHONE (A/C, No, Ext): 770-382-8954 **FAX (A/C, No):** 770-386-4081
E-MAIL ADDRESS: MStover@hdins.com

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A :	Cincinnati Specialty Underwriters	13037
INSURER B :	Twin City Fire Insurance Co.	29459
INSURER C :	Sentinel Insurance Co, Ltd	11000
INSURER D :	Certain Underwriters at Lloyd's, London	
INSURER E :	Westchester Surplus Lines Insurance Co	10172
INSURER F :		

COVERAGES **CERTIFICATE NUMBER:** 80950021 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	✓ COMMERCIAL GENERAL LIABILITY	✓	✓	CSU0024940	1/17/2024	1/17/2025	EACH OCCURRENCE	$ 1,000,000
	CLAIMS-MADE ✓ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
	✓ Contract & XCU						MED EXP (Any one person)	$ 5,000
	✓ $5000 Deductible per claim						PERSONAL & ADV INJURY	$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 3,000,000
	POLICY ✓ PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$ 3,000,000
	OTHER:							$
C	AUTOMOBILE LIABILITY	✓	✓	20UECKN3349	7/29/2024	7/29/2025	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	✓ ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	✓ HIRED AUTOS ONLY / ✓ NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
A	UMBRELLA LIAB ✓ OCCUR			CSU0024939	1/17/2024	1/17/2025	EACH OCCURRENCE	$ 5,000,000
	✓ EXCESS LIAB CLAIMS-MADE						AGGREGATE	$ 5,000,000
	DED RETENTION $ 0							$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		✓	20WECAT3242	7/29/2024	7/29/2025	✓ PER STATUTE / OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y / N: Y N/A						E.L. EACH ACCIDENT	$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000
C	IM-Installation			20SBAZT2793	4/19/2024	4/19/2025	$100,000 ($2500 deductible)	
D	Professional Liability			HPL24-0075	4/28/2024	4/28/2025	$1,000,000 per claim ($10,000 retention)	
A	Network Security & Electr Media Liab			CSU0202058	1/17/2024	1/17/2025	$100,000 per claim/aggregate	
E	Contractors Pollution Liability			G74452280 001	3/8/2024	1/17/2025	$1,000,000 each condition/$2,000,000 Agg	

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

--See Attached Remarks Schedule--

Ref#: 592413631

CERTIFICATE HOLDER

City of Tampa
Insurance Compliance
P.O. Box 100085 - ZS
Duluth GA 30096

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
H. L. Daniel

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AGENCY CUSTOMER ID: A

LOC #:

ADDITIONAL REMARKS SCHEDULE

Page ____ of ____

AGENCY	NAMED INSURED
HDINS,Inc dba Harry Daniel Insurance	Bliss Products and Services, Inc. 6831 S. Sweetwater Rd. Lithia Springs GA 30122
POLICY NUMBER	
CARRIER / NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 FORM TITLE: ACORD 25 (03/16)

HOLDER: City of Tampa Insurance Compliance
ADDRESS: P.O. Box 100085 - ZS Duluth GA 30096

Information provided by this certificate (including any addendum/attachment) is strictly limited per State of Georgia statute OCGA 33-24-19.1.

GENERAL LIABILITY: Additional insured for ongoing and completed operations, on a primary and non-contributory basis, when required by executed written contract per form, CSGA437 12/13.

GENERAL LIABILITY: Waiver of subrogation when required by executed written contract per form, CSGA408? 12/12.

AUTO LIABILITY: Additional insured, on a primary and non-contributory basis, and waiver of subrogation when required by executed written contract per form, HA9916 12/21.

EXCESS LIABILITY: General Liability, Auto Liability and Workers' Compensation policies are all listed on the Schedule of Underlying Insurance. Additional insured and waiver of subrogation per forms, CSCX100 02/13 and CSCX 207 10/20.

WORKERS' COMP: Waiver of subrogation when required by executed written contract per form, WC000313.

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AGENCY CUSTOMER ID: A

LOC #:

ADDITIONAL REMARKS SCHEDULE

Page ____ of ____

AGENCY		NAMED INSURED
HDINS,Inc dba Harry Daniel Insurance		Bliss Products and Services, Inc. 6831 S. Sweetwater Rd. Lithia Springs GA 30122
POLICY NUMBER		
CARRIER	NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 **FORM TITLE:** Certificate of Liability (03/16)

HOLDER: City of Tampa Insurance Compliance

ADDRESS: P.O. Box 100085 - ZS Duluth GA 30096

The afore-mentioned forms on the ADDENDUM/DOC apply to: City of Tampa, its elected officials, departments, officers, employees, and volunteers together with, as applicable, any associated lender of the City.

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From: ecertsonline SMTP:notification@ecertsonline.com
To: CityofTampa CityofTampa@Ebix.com
CC:
Subject: Cert No. 80950021 - Certificate: Bliss Products and Services, Inc. -
Date: 7/16/2024 5:39:29 AM
Attachment(s):

CAUTION: This email originated from outside of the organization! DO NOT click on links or open attachments unless you were expecting the email, recognize the sender, and know the content is safe.

This ACORD 25 (03/16) Certificate of Liability has been sent to you by Yami Martinez of or on behalf of HDINS,Inc dba Harry Daniel Insurance. This is an automated email do not reply. Send reply to: Yami@hdins.com .

Find attached the certificate of insurance for Bliss Products and Services, Inc.

Thank you,

This document was created by eCertsONLINE.

The attached or linked document(s) contain certification of insurance coverage for the insured named in the subject above. Your company is listed as the organization requesting receipt of these documents.

If this document is sent via e-mail, you must click on the link below. The linked document is in a pdf format, and you must have Adobe Acrobat Reader installed on your system. To download the Adobe Reader for free, visit www.Adobe.com.

If you have any questions regarding the content of this message, you should contact the Producer/Agency listed on the attached/linked documents.

To find out more about how you can create, send and receive all of your Certificates of Insurance or Evidences of Property documents via email, fax, US mail or next day mail, call Insurance Visions at (800) 497-9996, or visit our web site at www.eCertsONLINE.com.

Click on the following link to retrieve and print the documents.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS - AUTOMATIC STATUS WHEN REQUIRED IN CONSTRUCTION AGREEMENT WITH YOU - OPERATIONS AND COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

A. SECTION II - WHO IS AN INSURED is amended to include as an additional insured any person or organization when you and such person or organization have agreed in writing in a contract or agreement that such person or organization be added as an additional insured on your policy, but only with respect to "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions in the performance of your ongoing operations for the additional insured;
2. The acts or omissions of those acting on your behalf in the performance of your ongoing operations for the additional insured; or
3. "Your work" performed for the additional insured and included in the "products-completed operations hazard".

If not specified otherwise in the written contract or agreement, a person's or organization's status as an additional insured under this endorsement ends one year after your operations for that additional insured are completed. The written contract or agreement must be currently in effect or become effective during the term of this Coverage Part. The contract or agreement must be executed prior to the "bodily injury", "property damage" or "personal and advertising injury" to which this endorsement pertains.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to:

1. "Bodily injury", "property damage" or "personal and advertising injury" arising out of the rendering of, or the failure to render, any professional architectural, engineering or surveying services, including:
   a. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; or
   b. Supervisory, inspection, architectural or engineering activities.
2. "Bodily injury" or "property damage" arising out of "your work" for which a consolidated (wrap-up) insurance program has been provided by the prime contractor/project manager or owner of the construction project in which you are involved.
3. "Bodily injury", "property damage" or "personal and advertising injury" to any employee of you or to any obligation of the additional insured to indemnity another because of damages arising out of such injury.

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4. "Bodily injury", "property damage" or "personal and advertising injury" for which the Named Insured is afforded no coverage under this policy of insurance.

C. With respect to the insurance afforded to these additional insureds, **SECTION III - LIMITS OF INSURANCE** is amended to include:

The limits applicable to the additional insured are those specified in the written contract or agreement or in the Declarations of this Coverage Part, whichever is less. If no limits are specified in the written contract or agreement, the limits applicable to the additional insured are those specified in the Declarations of this Coverage Part. The limits of insurance are inclusive of and not in addition to the limits of insurance shown in the Declarations.

D. With respect to the insurance afforded to these additional insureds, **SECTION IV - COMMERCIAL GENERAL LIABILITY CONDITIONS, 4. Other Insurance** is amended to include:

Any coverage provided herein will be excess over any other valid and collectible insurance available to the additional insured whether primary, excess, contingent or on any other basis unless you have agreed in a written contract or written agreement executed prior to any loss that this insurance will be primary. This insurance will be noncontributory only if you have so agreed in a written contract or written agreement executed prior to any loss and this coverage is determined to be primary.

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US - PER CONTRACT

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

The following is added to Paragraph **8. Transfer of Rights of Recovery Against Others to Us** of **SECTION IV - CONDITIONS:**

If you have agreed, in a written contract or agreement, to provide a waiver of any right of recovery against a person or organization, we will waive any right of recovery we may have against that person or organization because of payments we make for injury or damage arising out of your ongoing operations or "your work" done under a contract with that person or organization and included in the "products-completed operations hazard". This waiver applies only to that person or organization for which you have agreed to in a written contract to provide said waiver.

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

COMMERCIAL AUTOMOBILE BROAD FORM ENDORSEMENT

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM

To the extent that the provisions of this endorsement provide broader benefits to the "insured" than other provisions of the Coverage Form, the provisions of this endorsement apply.

1. **BROAD FORM INSURED**

Paragraph .1. - WHO IS AN INSURED - of Section II - Liability Coverage is amended to add the following:

d. Subsidiaries and Newly Acquired or Formed Organizations

The Named Insured shown in the Declarations is amended to include:

(1) Any legal business entity other than a partnership or joint venture, formed as a subsidiary in which you have an ownership interest of more than 50% on the effective date of the Coverage Form. However, the Named Insured does not include any subsidiary that is an "insured" under any other automobile policy or would be an "insured" under such a policy but for its termination or the exhaustion of its Limit of Insurance.

(2) Any organization that is acquired or formed by you and over which you maintain majority ownership. However, the Named Insured does not include any newly formed or acquired organization:

(a) That is a partnership or joint venture,

(b) That is an "insured" under any other policy,

(c) That has exhausted its Limit of Insurance under any other policy, or

(d) 180 days or more after its acquisition or formation by you, unless you have given us notice of the acquisition or formation.

Coverage does not apply to "bodily injury" or "property damage" that results from an "accident" that occurred before you formed or acquired the organization.

e. Employees as Insureds

(1). Any "employee" of yours while using a covered "auto" you don't own, hire or borrow in your business or your personal affairs.

f. Lessors as Insureds

(1). The lessor of a covered "auto" while the "auto" is leased to you under a written agreement if:

(a) The agreement requires you to provide direct primary insurance for the lessor and

(b) The "auto" is leased without a driver.

Such a leased "auto" will be considered a covered "auto" you own and not a covered "auto" you hire.

g. Additional Insured if Required by Contract

(1) When you have agreed, in a written contract or written agreement, that a person or organization be added as an additional insured on your business auto policy, such person or organization is an "insured", but only to the extent such person or organization is liable for "bodily injury" or "property damage" caused by the conduct of an "insured" under paragraphs a. or b. of Who Is An Insured with regard to the ownership, maintenance or use of a covered "auto."

The insurance afforded to any such additional insured applies only if the "bodily injury" or "property damage" occurs:

(a) During the policy period, and

(b) Subsequent to the execution of such written contract, and

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(c) Prior to the expiration of the period of time that the written contract requires such insurance be provided to the additional insured.

(2) How Limits Apply

If you have agreed in a written contract or written agreement that another person or organization be added as an additional insured on your policy, the most we will pay on behalf of such additional insured is the lesser of:

(a) The limits of insurance specified in the written contract or written agreement; or

(b) The Limits of Insurance shown in the Declarations.

Such amount shall be a part of and not in addition to Limits of Insurance shown in the Declarations and described in this Section.

(3) Additional Insureds Other Insurance

If we cover a claim or "suit" under this Coverage Part that may also be covered by other insurance available to an additional insured, such additional insured must submit such claim or "suit" to the other insurer for defense and indemnity.

However, this provision does not apply to the extent that you have agreed in a written contract or written agreement that this insurance is primary and non-contributory with the additional insured's own insurance.

(4) Duties in The Event Of Accident, Claim, Suit or Loss

If you have agreed in a written contract or written agreement that another person or organization be added as an additional insured on your policy, the additional insured shall be required to comply with the provisions in LOSS CONDITIONS 2. - DUTIES IN THE EVENT OF ACCIDENT, CLAIM , SUIT OR LOSS – OF SECTION IV – BUSINESS AUTO CONDITIONS, in the same manner as the Named Insured.

2. Primary and Non-Contributory if Required by Contract

Only with respect to insurance provided to an additional insured in A.1.g. - Additional Insured If Required by Contract, the following provisions apply:

(1) Primary Insurance When Required By Contract

This insurance is primary if you have agreed in a written contract or written agreement that this insurance be primary. If other insurance is also primary, we will share with all that other insurance by the method described in Other Insurance 5.d.

(2) Primary And Non-Contributory To Other Insurance When Required By Contract

If you have agreed in a written contract or written agreement that this insurance is primary and non-contributory with the additional insured's own insurance, this insurance is primary and we will not seek contribution from that other insurance.

Paragraphs **(1)** and **(2)** do not apply to other insurance to which the additional insured has been added as an additional insured.

When this insurance is excess, we will have no duty to defend the insured against any "suit" if any other insurer has a duty to defend the insured against that "suit". If no other insurer defends, we will undertake to do so, but we will be entitled to the insured's rights against all those other insurers.

When this insurance is excess over other insurance, we will pay only our share of the amount of the loss, if any, that exceeds the sum of:

(1) The total amount that all such other insurance would pay for the loss in the absence of this insurance; and

(2) The total of all deductible and self-insured amounts under all that other insurance.

We will share the remaining loss, if any, by the method described in SECTION IV- Business Auto Conditions, B. General Conditions, Other Insurance 5.d.

3. AUTOS RENTED BY EMPLOYEES

Any "auto" hired or rented by your "employee" on your behalf and at your direction will be considered an "auto" you hire.

The SECTION IV- Business Auto Conditions, B. General Conditions, 5. OTHER INSURANCE Condition is amended by adding the following:

e. If an "employee's" personal insurance also applies on an excess basis to a covered "auto" hired or rented by your "employee" on your behalf and at your direction, this insurance will be primary to the "employee's" personal insurance.

4. **AMENDED FELLOW EMPLOYEE EXCLUSION**

EXCLUSION 5. - FELLOW EMPLOYEE - of SECTION II - LIABILITY COVERAGE does not apply if you have workers' compensation insurance in-force covering all of your "employees".

Coverage is excess over any other collectible insurance.

5. **HIRED AUTO PHYSICAL DAMAGE COVERAGE**

If hired "autos" are covered "autos" for Liability Coverage and if Comprehensive, Specified Causes of Loss, or Collision coverages are provided under this Coverage Form for any "auto" you own, then the Physical Damage Coverages provided are extended to "autos" you hire or borrow, subject to the following limit.

The most we will pay for "loss" to any hired "auto" is:

(1) $100,000;

(2) The actual cash value of the damaged or stolen property at the time of the "loss"; or

(3) The cost of repairing or replacing the damaged or stolen property,

whichever is smallest, minus a deductible. The deductible will be equal to the largest deductible applicable to any owned "auto" for that coverage. No deductible applies to "loss" caused by fire or lightning. Hired Auto Physical Damage coverage is excess over any other collectible insurance. Subject to the above limit, deductible and excess provisions, we will provide coverage equal to the broadest coverage applicable to any covered "auto" you own.

We will also cover loss of use of the hired "auto" if it results from an "accident", you are legally liable and the lessor incurs an actual financial loss, subject to a maximum of $1000 per "accident".

This extension of coverage does not apply to any "auto" you hire or borrow from any of your "employees", partners (if you are a partnership), members (if you are a limited liability company), or members of their households.

6. **PHYSICAL DAMAGE - ADDITIONAL TEMPORARY TRANSPORTATION EXPENSE COVERAGE**

Paragraph A.4.a. of SECTION III - PHYSICAL DAMAGE COVERAGE is amended to provide a limit of $50 per day and a maximum limit of $1,000.

7. **LOAN/LEASE GAP COVERAGE**

Under SECTION III - PHYSICAL DAMAGE COVERAGE, in the event of a total "loss" to a covered "auto", we will pay your additional legal obligation for any difference between the actual cash value of the "auto" at the time of the "loss" and the "outstanding balance" of the loan/lease.

"Outstanding balance" means the amount you owe on the loan/lease at the time of "loss" less any amounts representing taxes; overdue payments; penalties, interest or charges resulting from overdue payments; additional mileage charges; excess wear and tear charges; lease termination fees; security deposits not returned by the lessor; costs for extended warranties, credit life Insurance, health, accident or disability insurance purchased with the loan or lease; and carry-over balances from previous loans or leases.

8. **AIRBAG COVERAGE**

Under Paragraph B. EXCLUSIONS - of SECTION III - PHYSICAL DAMAGE COVERAGE, the following is added:

The exclusion relating to mechanical breakdown does not apply to the accidental discharge of an airbag.

9. **ELECTRONIC EQUIPMENT - BROADENED COVERAGE**

a. The exceptions to Paragraphs B.4 - EXCLUSIONS - of SECTION III - PHYSICAL DAMAGE COVERAGE are replaced by the following:

Exclusions **4.c.** and **4.d.** do not apply to equipment designed to be operated solely by use of the power from the "auto's" electrical system that, at the time of "loss", is:

(1) Permanently installed in or upon the covered "auto";

(2) Removable from a housing unit which is permanently installed in or upon the covered "auto";

(3) An integral part of the same unit housing any electronic equipment described in Paragraphs (1) and (2) above; or

(4) Necessary for the normal operation of the covered "auto" or the monitoring of the covered "auto's" operating system.

b. Section III, Physical Damage Coverage, Limit of Insurance, Paragraph C.2. is amended to add the following:

$1,500 is the most we will pay for "loss" in any one "accident" to all electronic equipment (other than equipment designed solely for the reproduction of sound, and accessories used with such equipment) that reproduces, receives or transmits audio, visual or data signals which, at the time of "loss", is:

(1) Permanently installed in or upon the covered "auto" in a housing, opening or other location that is not normally used by the "auto" manufacturer for the installation of such equipment;

(2) Removable from a permanently installed housing unit as described in Paragraph 2.a. above or is an integral part of that equipment; or

(3) An integral part of such equipment.

c. For each covered "auto", should loss be limited to electronic equipment only, our obligation to pay for, repair, return or replace damaged or stolen electronic equipment will be reduced by the applicable deductible shown in the Declarations, or $250, whichever deductible is less.

10. EXTRA EXPENSE - BROADENED COVERAGE

Under Paragraph A. - COVERAGE - of SECTION III - PHYSICAL DAMAGE COVERAGE, we will pay for the expense of returning a stolen covered "auto" to you.

11. GLASS REPAIR - WAIVER OF DEDUCTIBLE

Under Paragraph D. - DEDUCTIBLE - of SECTION III - PHYSICAL DAMAGE COVERAGE, the following is added:

No deductible applies to glass damage if the glass is repaired rather than replaced.

12. TWO OR MORE DEDUCTIBLES

Under Paragraph D. - DEDUCTIBLE - of SECTION III - PHYSICAL DAMAGE COVERAGE, the following is added:

If another Hartford Financial Services Group, Inc. company policy or coverage form that is not an automobile policy or coverage form applies to the same "accident", the following applies:

(1) If the deductible under this Business Auto Coverage Form is the smaller (or smallest) deductible, it will be waived;

(2) If the deductible under this Business Auto Coverage Form is not the smaller (or smallest) deductible, it will be reduced by the amount of the smaller (or smallest) deductible.

13. AMENDED DUTIES IN THE EVENT OF ACCIDENT, CLAIM, SUIT OR LOSS

The requirement in LOSS CONDITIONS 2.a. - DUTIES IN THE EVENT OF ACCIDENT, CLAIM, SUIT OR LOSS - of SECTION IV - BUSINESS AUTO CONDITIONS that you must notify us of an "accident" applies only when the "accident" is known to:

(1) You, if you are an individual;

(2) A partner, if you are a partnership;

(3) A member, if you are a limited liability company; or

(4) An executive officer or insurance manager, if you are a corporation.

14. UNINTENTIONAL FAILURE TO DISCLOSE HAZARDS

If you unintentionally fail to disclose any hazards existing at the inception date of your policy, we will not deny coverage under this Coverage Form because of such failure.

15. HIRED AUTO - COVERAGE TERRITORY

SECTION IV, BUSINESS AUTO CONDITIONS, PARAGRAPH B. GENERAL CONDITIONS, 7. - POLICY PERIOD, COVERAGE TERRITORY - is added to include the following:

(6) For short-term hired "autos", the coverage territory with respect to Liability Coverage is anywhere in the world provided that if the "insured's" responsibility to pay damages for "bodily injury" or "property damage" is determined in a "suit," the "suit" is brought in the United States of America, the territories and possessions of the United States of America, Puerto Rico or Canada or in a settlement we agree to.

16. WAIVER OF SUBROGATION

Paragraph 5. TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US - of SECTION IV - BUSINESS AUTO CONDITIONS A. Loss Conditions is amended by adding the following:

We waive any right of recovery we may have against any person or organization with whom you have a written contract that requires such waiver because of payments we make for damages under this Coverage Form.

17. RESULTANT MENTAL ANGUISH COVERAGE

The definition of "bodily injury" in SECTION V-DEFINITIONS, C. is replaced by the following:

"Bodily injury" means bodily injury, sickness or disease sustained by any person, including mental anguish or death resulting from any of these.

18. EXTENDED CANCELLATION CONDITION

Paragraph 2. of the COMMON POLICY CONDITIONS - CANCELLATION - applies except as follows:

If we cancel for any reason other than nonpayment of premium, we will mail or deliver to the first Named Insured written notice of cancellation at least 60 days before the effective date of cancellation.

19. HYBRID, ELECTRIC, OR NATURAL GAS VEHICLE PAYMENT COVERAGE

In the event of a total loss to a "non-hybrid" auto for which Comprehensive, Specified Causes of Loss, or Collision coverages are provided under this Coverage Form, then such Physical Damage Coverages are amended as follows:

a. If the auto is replaced with a "hybrid" auto or an auto powered solely by electricity or natural gas, we will pay an additional 10%, to a maximum of $2,500, of the "non-hybrid" auto's actual cash value or replacement cost, whichever is less,

b. The auto must be replaced and a copy of a bill of sale or new lease agreement received by us within 60 calendar days of the date of "loss,"

c. Regardless of the number of autos deemed a total loss, the most we will pay under this Hybrid, Electric, or Natural Gas Vehicle Payment Coverage provision for any one "loss" is $10,000.

For the purposes of the coverage provision,

a. A "non-hybrid" auto is defined as an auto that uses only an internal combustion engine to move the auto but does not include autos powered solely by electricity or natural gas.

b. A "hybrid" auto is defined as an auto with an internal combustion engine and one or more electric motors; and that uses the internal combustion engine and one or more electric motors to move the auto, or the internal combustion engine to charge one or more electric motors, which move the auto.

20. VEHICLE WRAP COVERAGE

In the event of a total loss to an "auto" for which Comprehensive, Specified Causes of Loss, or Collision coverages are provided under this Coverage Form, then such Physical Damage Coverages are amended to add the following:

In addition to the actual cash value of the "auto", we will pay up to $1,000 for vinyl vehicle wraps which are displayed on the covered "auto" at the time of total loss. Regardless of the number of autos deemed a total loss, the most we will pay under this Vehicle Wrap Coverage provision for any one "loss" is $5,000. For purposes of this coverage provision, signs or other graphics painted or magnetically affixed to the vehicle are not considered vehicle wraps.

Bliss Products and Services, Inc.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

Policy Number: 20WECAT3242 **Endorsement Number:** 01
Effective Date: 7/29/2024 Effective hour is the same as stated on the Information Page of the policy.
Named Insured and Address:

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule.

This agreement shall not operate directly or indirectly to benefit anyone not named in the Schedule.

SCHEDULE

ANY PERSON OR ORGANIZATION
FROM WHOM YOU ARE REQUIRED BY
WRITTEN CONTRACT OR AGGREEMENT
TO OBTAIN THIS WAIVER FROM US.

Countersigned by _____
Authorized Representative

Form WC 00 03 13 Printed in U.S.A.

Policy Expiration Date: 7/29/2025

City of Tampa
Jane Castor, Mayor

Purchasing Department
Deanna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E. Hanna Ave.
Tampa, Florida 33610
Office: (813) 274-8351
Fax: (813) 274-8355

M E M O R A N D U M

DATE: July 17, 2024

TO: Lisa Grizzle
Parks & Recreation Administrative Manager
Parks and Recreation

FROM: Theresa Samuel, Purchasing Technician

RE: **REQUEST FOR RENEWAL/RE-BID**

The award for **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421** provided by **KOMPAN, INC.** will expire on **JANUARY 12, 2025**. This award has a one-year renewal period. Per the terms of the contract, the vendor is entitled to request a **3.0%** escalation using the Consumer Price Index.

We are requesting information from you as to your needs relative to renewing the award for the above referenced goods. Please indicate your preference with an **(X)**, for one of the options listed below.

__x__ 1. You want to renew with the current vendor(s). ***Please attach to the Request for Renewal/Re-bid form an explanation as to why it is in the best interest of the Department to Re-new rather than Re-bid. Include a statement that the current pricing has been reviewed and remains fair and reasonable. The information that you provide will appear in the background section of the agenda request form that will appear before City Council. Please submit the MBD-30 payment form (if applicable) to this renewal. The MBD-30 form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the evaluation period.***

a.__x__ Please complete the attached **Vendor Performance Evaluation** form.

b._____ Please complete the attached **MBD-30 Sub-Contractor Payment** form **(if applicable for this renewal).**

	ESTIMATED EXPENDITURE	FUND	COST CENTER	ACCOUNT
FY_____	Controlled by requisition			
FY_____				

(If funds are to be split between two fiscal years, please indicate the years and amounts)

____ 2. You do not want to renew with this vendor and would like to Re-bid. **Please provide an explanation:**

_____

_____

____ 3.You do not want to renew or re-bid at this time. (Let contract expire).

Please return this document and the requested information to my office by **July 23, 2024,** in order that we may process your request in a timely manner.

Dept. Contact Name (Printed): _Danielle Riffenburg_____ **Signature:** _____ **Date:** _____

Please fax to 813-274-8355 or email to theresa.samuel@tampagov.net

VENDOR PERFORMANCE EVALUATION

Name of Vendor Reviewed:	KOMPAN, INC.	
Contract Name & Number:	PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421	
Rating Period	**From: 1/13/24**	**To: Present**

	Place an X for your selection	**Excellent**	**Satisfactory**	**Unsatisfactory**
Delivery/Service completed when required:	Delivered/Service as ordered and to spec?	x		
	Timeliness of Product/Service	x		
	Quality of Product/Service	x		
	Delivery of Products/ Complete/ Undamaged?	X		

Please Describe Quality of Product or Service: Products delivered are as expected, with good follow-up for any concerns or warranty items.

Customer Satisfaction	Communication (Phone, E-Mail, or Fax availability)?	x		
	Responsiveness and proper follow up regarding any contractual or performance issues?	x		
	Product or Services fulfilled/completed	x		

Have you discussed issues with vendor? ___x___ Yes _____ No

Would you like to request a meeting with Purchasing & Vendor? _____Yes ____x___ No

Performance during rating period: Vendor is responsive and provides quality products.

Customer Service Comments: Vendor's customer service is excellent.

Dept. Contact Name (Printed): _Danielle Riffenburg_____ **Signature:** Danielle Riffenburg Digitally signed by Danielle Riffenburg Date: 2024.08.29 15:29:04 -04'00'

Rev: 4/20/11

PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

KOMPAN, INC.

Parks and Recreation believes it is in the best interest of the City to renew the contract for Bid #31041421 with KOMPAN, INC. Maintaining the current contract will allow for efficient maintenance and repair of existing and new equipment installed under this contract. The current pricing has been reviewed and remains fair and reasonable.

City of Tampa
Jane Castor, Mayor

Purchasing Department
DeAnna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E Hanna Avenue
Tampa, Florida 33610

Office (813) 274-8351
Fax: (813) 274-8355

September 12, 2024

Eric Lewis
Kompan, Inc.
605 W. Howard Lane, Ste. 101
Austin, TX 78753
EriLew@KOMPAN.com

Dear Mr. Lewis:

Your firm has an award with the City of Tampa to provide **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421**

This existing award expires on **JANUARY 12, 2025**. Under the provisions of this award, terms and conditions may be renewed if mutually agreeable to both parties for an additional **one-year** period.

If your firm desires to renew the award, please complete and return the following:

- Statement of Intent
- Form MBD10 – "Schedule of All Sub-Contractors/Consultants/Suppliers Solicited"
- Form MBD20 – "Schedule of Sub-Contractors/Consultants/Suppliers to be Utilized"
- Form MBD50 – "Good Faith Effort Compliance Plan (GFECP) Guidelines"
- Form MBD30 – "Sub-Contractors/Consultant/Suppliers Payments"
- Affidavit of Compliance:
    - FS287.138 Compliance with Foreign Countries of Concern
    - FS287.133 Convicted Vendor List (Public Entity Crimes)
    - FS287.135 Prohibition Against Contracting with Scrutinized Companies
    - FS787.06 Prohibition Against Human Trafficking
    - FS448.095 Compliance With E-Verify

If your firm desires to renew the award, please complete and return the above listed documents. The MBD forms should document any subcontractors that are going to be used to provide goods/services for the award's renewal period and/or if any request for payments has been submitted. If payments were not requested or subcontractors were not used, please mark each form accordingly. **All documents must be submitted for the award/contract to be renewed.**

If you do not wish to renew, please indicate so on the attached Statement of Intent.

Sincerely,

Theresa Samuel
Purchasing Technician
(813) 274-8635
theresa.samuel@tampagov.net

STATEMENT OF INTENT

I, Eric Lewis,

being authorized to contract for KOMPAN, INC., do hereby express the firm's desire to renew the above referenced agreement upon the same prices, same terms and conditions. I understand that an extension of the agreement requires the City's approval. This statement represents the above firm's binding approval of an extension of this agreement.

By:  9/20/2024

Authorized Signature Date

Eric Lewis

Type or Print Name Above

Title: Treasurer

Comments:

( ) We do not wish to renew this award. The source for non-renewal is:

By: _____ _____

Authorized Signature Date

_____

Type or Print Name Above

Title: _____

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-10)

Contract No.: 21-P-00417 Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

Company Name: KOMPAN, Inc. Address: _____

Federal ID: _____ Phone: _____ Fax: _____ Email: _____

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.

- ☐ **No Firms were contacted or solicited for this contract.**
- ☑ **No Firms were contacted because:** Only applicable vendor in Tampa DMS is a top competitor (Top Line). Based on NIGP codes.
- ☐ **See attached list of additional Firms solicited and all supplemental information (List must comply to this form)**

Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=W/MBE O = Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub-contracting opportunities on this contract.

Signed: _____ Name/Title: Eric Lewis Treasurer Date: 9/20/2024

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

Page 2 of 4 – DMI Solicited/Utilized

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) Solicited Form (Form MBD-10)

This form must be submitted with all bids or proposals. **All** subcontractors (regardless of ownership or size) solicited and subcontractors from whom unsolicited quotations were received must be included on this form. The instructions that follow correspond to the headings on the form required to be completed. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Firms were contacted or solicited for this contract.** Checking the box indicates that a pre-determined Subcontract Goal or Participation Plan Requirement was not set by the City resulting in your business not using subcontractors and will self-perform all work. If during the performance of the contract you employ subcontractors, the City must pre-approve subcontractors. Use of the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: Certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors.
- **No Firms were contacted because.** Provide brief explanation why no firms were contacted or solicited.
- **See attached documents.** Check box, if after you have completed the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the form. All DMI data not submitted on the MBD Form-10 must be in the same format and have all requested data from MBD Form-10 included.

The following instructions are for information of any and all subcontractors solicited.

- **"S" = SLBE, "W" = W/MBE.** Enter "S" for firms Certified by the City as Small Local Business Enterprises and/or "W" for firms Certified by the City as either Women/Minority Business Enterprise; **"O" = Non-certified others.**
- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification and payment of the contractor/subcontractor.
- **Company Name, Address, Phone & Fax.** Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials** indicate the trade, service, or materials provided by the subcontractor. NIGP codes aka "National Institute of Governmental Purchasing" are listed at top section of document.
- **Contact Method L=letter, F=fax, E=Email, P=Phone.** Indicate with letter the method(s) of soliciting for bid.
- **Quote or Resp. (response) Rec'd (received) Y/N**. Indicate "Y" Yes if you received a quotation or if you received a response to your solicitation. Indicate "N" No if you received no response to your solicitation from the subcontractor. Must keep records: log, ledger, documentation, etc. that can validate/verify.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.: 21-P-00417 Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

Company Name: KOMPAN, Inc. Address: 605 W Howard Lane, Ste 101, Austin TX 78753

Federal ID: 91-0819688 Phone: 800-426-9788 Fax: 512-788-9285 Email: uscontract@Kompan.com

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

☐ **See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)**

Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

☐ **No Subcontracting/consulting (of any kind) will be performed on this contract.**

☑ **No Firms are listed to be utilized because:** Firm found are our competitors

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=W/MBE O =Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %
O 331204851	Precision Playground Holdings, Inc. 45 Alabama Ave Jacksonville, FL 32218 US Stacey@precisionplaygrounds.com / 904-236-5341	M	98873	as needed	as needed
O	Duraplay 150 Brownson Ln Driftwood, TX 78619 jenn@duraplay.com / (512) 847-2473	M	65000	as needed	as needed
O	ProTechs 2072 Coon Rd Akron, OH 44321 blouis@pro-techssurfacing.com / 330-576-6058	M	65000	as needed	as needed
O	The Fibar Group 80 Business Park Drive Armonk, NY 10504 info@fibar.com / 800-342-2721 x317	M	65000	as needed	as needed

Total ALL Subcontract / Supplier Utilization $ as needed

Total SLBE Utilization $ _____

Total W/MBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. 0 **% Percent W/MBE Utilization of Total Bid/Proposal Amt.** 0 **%**

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: _____ Name/Title: Eric Lewis, Treasurer Date: 9/20/2024

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive Forms must be included with Bid / Proposal

Page 4 of 4 DMI – Solicited/Utilized

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) to be Utilized Form

(Form MBD-20)

This form must be submitted with all bids or proposals. All subcontractors (regardless of ownership or size) projected to be utilized must be included on this form. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

Contract No. This is the number assigned by the City of Tampa for the bid or proposal.

- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Subcontracting/consulting (of any kind) will be performed on this contract.** Checking box indicates your business will not use subcontractors when no Subcontract Goal or Participation Plan Requirement was set by the City, but will self-perform all work. When subcontractors are utilized during the performance of the contract, the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors, including completion and submitting Form-10 and Form-20.
- **No Firms listed To-Be-Utilized.** Check box; provide brief explanation why no firms were retained when a goal or participation plan requirement was set on the contract. **Note: Mandatory compliance with Good Faith Effort outreach (GFECP) requirements applies (MBD Form-50) and supporting documentation must accompany the bid.**
- **See attached documents.** Check box, if after completing the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the scope/value/percent utilization of subcontractors. Reproduce copies of MBD-20 and attach. All data not submitted on duplicate forms must be in the same format and content as specified in these instructions.

The following instructions are for information of Any and All subcontractors To Be Utilized.

- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **"S" = SLBE, "W" = W/MBE.** Enter "S" for firms Certified by the City as Small Local Business Enterprises and/or "W" for firms Certified by the City as Women/Minority Business Enterprise; **"O" = Non-certified others**.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials (NIGP code if Known)** Indicate the trade, service, or material provided by the subcontractor. Abbreviated list of NIGP is available at http:/www.tampagov.net/mbd "Information Resources".
- **Amount of Quote, Letters of Intent** (required for both SLBEs and W/MBEs).
- **Percent of Work/Contract.** Indicate the percent of the total contract price the subcontract(s) represent. For CCNA only (i.e. Consultant A/E Services) you must indicate subcontracts as percent of total scope/contract.
- **Total Subcontract/Supplier Utilization.** – Provide total dollar amount of all subcontractors/suppliers projected to be used for the contract. (Dollar amounts may be optional in CCNA depending on solicitation format).
- **Total SLBE Utilization.** Provide total dollar amount for all projected SLBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Total W/MBE Utilization.** Provide total dollar amount for all projected W/MBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Percent SLBE Utilization.** Total amount allocated to SLBEs divided by the total bid/proposal amount.
- **Percent W/MBE Utilization.** Total amount allocated to W/MBEs divided by the total bid/proposal amount.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign, and Submit all Forms 10,20, & 50 SHALL render the Bid or Proposal Non-Responsive

Good Faith Effort Compliance Plan (GFECP) Guidelines

for Women/Minority Business Enterprise\Small Local Business Enterprise ParticipationCity of Tampa - Equal Business Opportunity Program

(Form MBD 50 – See detailed instructions on page 3 of 3)

Contract Name PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND [illegible]) Bid Date 9/20/2024

Bidder/Proposer KOMPAN, Inc.

Signature [signature] Date 9/20/2024

Name Eric Lewis Title Treasurer

The Compliance Plan with attachments is a true account of Good Faith Efforts (GFE) made to achieve the participation goals as specified for Women/Minority Business Enterprises & Small Local Business Enterprises (W/MBE & SLBE) on the referenced contract:

☐ **W/MBE & SLBE participation Goal is Not Specified for this Solicitation however participation is aspirational and GFECP is required.**

☐ **W/MBE & SLBE participation Goal is Met or Exceeded (refer to Goal-Set Form MBD-90).**

☐ **W/MBE & SLBE participation Goal is Not Fully Achieved (refer to Goal-Set Form MBD-90).**

For each checkbox above Bidders/Proposers shall submit DMI Forms 10 and 20 which accurately report all subcontractors solicited and all subcontractors to-be-utilized. The following list is an overview of the required baseline GFECP action steps for all bids/proposals. Furthermore, it is understood that these GFECP requirements are weighted in the compliance evaluation based on the veracity and demonstrable degree of documentation provided with the bid/proposal:

(Check applicable boxes below - Must enclose supporting documents accordingly with Qualifying Remarks)

(1) Solicited through reasonable and available means the interest of W/MBE & SLBEs that have the capability to perform the work of the contract. The Bidder or Proposer must solicit this interest within enough time to allow the W/MBE & SLBEs to respond. The Bidder or Proposer must take appropriate steps to follow up initial solicitations with interested W/MBE & SLBEs. ☐ **See DMI report forms for subcontractors solicited.** ☐ **See enclosed supplemental data on solicitation efforts.**

☐ **Qualifying Remarks**

(2) Provided interested W/MBE & SLBEs with adequate, specific scope information about the plans, specifications, and requirements of the contract, including addenda, in a timely manner to assist them in responding to the requested scope identified by bidder/proposer for the solicitation. ☐ **See enclosed actual solicitations used.**
☐ **Qualifying Remarks**

(3) Negotiated in good faith with interested W/MBE & SLBEs that have submitted bids (e.g. adjusted quantities or scale). Documentation of negotiation must include the names, addresses, and telephone numbers of W/MBE & SLBEs that were solicited; the date of each such solicitation; a description of the information provided regarding the plans and specifications for the work selected for subcontracting; and evidence as to why agreements could not be reached with W/MBE & SLBEs to perform the work. Additional costs involved in soliciting and using subcontractors is not a sufficient reason for a bidder/proposer's failure to meet goals or achieve participation, as long as such costs are reasonable. Bidders are not required to accept excessive quotes in order to meet the goal.
☐ **DMI Utilized Forms for sub-(contractor/consultant) reflect genuine negotiations** ☐ **This project is an RFQ/RFP in nature and negotiationsare limited to clarifications of scope/percentages, specifications, qualifications and subs fee schedules.**
☐ **See enclosed documentation.**
☐ **Qualifying Remarks**

(4) Not rejecting W/MBE & SLBEs as being unqualified without justification based on a thorough investigation of their capabilities. The W/MBE & SLBEs standing within its industry, membership in specific groups, organizations / associations and political or social affiliations are not legitimate causes for rejecting or not soliciting bids to meet the goals.
■ **Not applicable.** ☐ **See attached justification for rejection of a subcontractor's bid or proposal.** ☐ **Qualifying Remarks**

(5) Made scope(s) of work available to W/MBE & SLBE subcontractors and suppliers; and, segmented portions of the work or material consistent with the available W/MBE & SLBE subcontractors and suppliers, to facilitate meeting the goal. ☐ **In addition, Sub-Contractors could bid on their own choice of work or trade without restriction to a pre-determined**

portion. ◻ **See enclosed comments.**◻ **Qualifying Remarks**

(6) Made good faith efforts, despite the ability or desire of Bidder/Proposer to perform the sub-tasks of a contract with its own forces/organization. A Bidder/Proposer who desires to self-perform the sub-tasks of a contract must demonstrate good faith efforts if the goal has not been met. ◻ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self-performed by the prime.** ◻ **Qualifying Remarks w/Documents**

(7) Segmented the portions of the work to be performed by W/MBEs & SLBEs in order to increase the likelihood that the goals will be met. This includes, where appropriate, breaking out contract work items into economically feasible units (quantities/scale) to facilitate W/MBE & SLBE participation, even when the Bidder/Proposer might otherwise prefer to perform these work items with its own forces. ◻ **Sub-Contractors could bid on their own choice of work or trade without restriction to a pre- determined portion.**◻ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self- performed by the prime.** ◻ **See enclosed comments.**◻ **Qualifying Remarks**

(8) Made efforts to assist interested W/MBEs & SLBEs in obtaining bonding, lines of credit, or insurance as required by the City or contractor.
◻ **See enclosed documentation on initiatives undertaken and methods to accomplish.** ◻ **Qualifying Remarks**

(9) Made efforts to assist interested W/MBEs & SLBEs in obtaining necessary equipment, supplies, materials, or related assistance or services, including participation in an acceptable mentor-protégé program. ◻ **See enclosed documentation of initiatives and/or agreements.** ◻ **Qualifying Remarks**

(10) Effectively used the services of the City and other organizations that provide assistance in the recruitment and placement of W/MBEs & SLBEs.
◻ **See enclosed documentation of services engaged.** ◻ **Overview (attached) of tactical actions and resources employed toward recruitment**

Note: Any unsolicited information in support of your Bid/RFP Compliance must accompany your submittal. ◻ **Identify Information Submitted**

Participation Plan: Guidance for Complying with Good Faith Efforts Outreach (page 3 of 3)

(1) All firms on the W/MBE & SLBE Goal Setting List must be solicited and documentation provided for email, fax,letters, phone calls, and other methods of outreach/communication with the listed firms. The DMI Solicited and DMI-Utilized forms must be completed for all firms solicited and all firms utilized. Other opportunities for subcontracting should be explored to attain participation. May consult Tampa EBO Office and/or researching the on-line Diversity Management Business System Directory for Tampa certified W/MBE & SLBEfirms.

(2) Solicitation of W/MBE & SLBEs, via written or electronic notification, should provide specific information on the services needed, where plans can be reviewed and assistance offered in obtaining these, if required. Solicitations should be sent a minimum of a week (i.e. 5 city business days or more) before the bid/proposal date. Actual copies of the bidder's solicitation containing their scope-specific instructions should be provided.

(3) With any quotes received, a follow-up should be made when needed to confirm detail scope of work. For anyW/MBE & SLBE low quotes rejected, an explanation shall be provided detailing negotiation efforts.

(4) If a low bid W/MBE & SLBE is rejected or deemed unqualified the contractor must provide an explanation and supporting documentation for this decision.

(5) Prime shall break down portions of work into economical feasible opportunities for subcontracting. The W/MBE & SLBE directory may be useful in identifying additional subcontracting opportunities and certified firms not listed in the "W/MBE & SLBE Goal Setting Firms Contact List."

(6) Contractor shall not preclude W/MBE & SLBEs from bidding on any part of work, even if the Contractor may desire to self-perform aspects of the work.

(7) Contractor shall avoid relying solely on subcontracting those scopes of work where W/MBE & SLBE availabilityis not sufficient to attain pre-determined goals; including RFP/RFQ solicitations, all of which require GFECPcompliance to achieve sub-consultant participation.

(8) In its solicitations, the Bidder should offer assistance to W/MBE & SLBEs in obtaining bonding, insurance, et cetera, if required of subcontractors by the City or Prime Contractor.

(9) In its solicitation, the Bidder should offer assistance in obtaining equipment for a specific job to W/MBE & SLBEs, if needed. This includes mobilization where applicable.

(10) Contractor should use the services offered by such agencies as the Small Business Development Center (SBDC) @ University South Fla.; SBDC @ Hillsborough County Entrepreneur Collaborative Center; Hillsborough NAACP Empowerment Center; Hillsborough County Economic Development Department DM/DWBE/SBE Program and Prospera-Hispanic Business Assoc. to name a few for the recruitment and placement of available WMBEs/SLBEs.

City of Tampa

Page 1 of 2 –DMI Payment
City of Tampa – DMI Sub-(Contractors/Consultants/Suppliers) Payments
(FORM MBD-30)

[ ] Partial [ ] Final

Contract No.: 21-P-00417 WO#,(if any): _____ Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES). BID #3104421

Contractor Name: KOMPAN, Inc. Address: 605 W Howard Lane, Ste 101, Austin TX 78753

Federal ID: 91-0819688 Phone: 800-426-9788 Fax: 512-788-9285 Email: uscontract@kompan.com

GC Pay Period: N/A Payment Request/Invoice Number: N/A City Department: N/A

Total Amount Requested for pay period: $ N/A Total Contract Amount (including change orders):$ N/A

-Type of Ownership - (F=Female M=Male), BF BM = African Am., HF HM = Hispanic Am., AF AM = Asian Am., NF NM = Native Am., CF CM = Caucasian S = SLBE

Type Trade/Work Activity []Sub []Supplier Federal ID	Company Name Address Phone & Fax	Total Sub Contract Or PO Amount	Amount Paid To Date Amount Pending Previously Reported	Amount To Be Paid For This Period Sub Pay Period Ending Date
	n/a		$	$
			$	$
			$	$
			$	$
			$	$
			$	$

(Modifying This Form or Failure to Complete and Sign May Result in Non-Compliance)

Certification: I hereby certify that the above information is a true and accurate account of payments to sub – contractors/consultants on this contract.

Signed: _____ Name/Title: Eric Lewis, Treasurer Date: 9/23/2024

DMI form 30 (rev. 01/15/2020)

Note: Detailed Instructions for completing this form are on the next page

Page 2 of 2 – DMI Payment

Instructions for completing The DMI Sub-(Contractors/Consultants/ Suppliers) Payment Form (Form MBD-30)

This form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the pay period. If applicable, after payment has been made to the subcontractor, "Waiver and Release of Lien upon Progress Payment", "Affidavit of Contractor in Connection with Final Payment", or an affidavit of payment must be submitted with the amount paid for the pay period. The following will detail what data is required for this form. The instructions that follow correspond to the headings on the form required to be completed. **(Modifying or omitted information from this form my result in non-compliance).**

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **W.O.#** If the report covers a work order number (W.O.#) for the contract, please indicate it in that space.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business.
- **Address.** The physical address of your business.
- **Federal ID.** A number assigned to a business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **Pay Period.** Provide start and finish dates for pay period. (e.g. 05/01/13 – 05/31/13)
- **Payment Request/Invoice Number.** Provide sequence number for payment requests. (ex. Payment one, write 1 in space, payment three, write 3 in space provided.)
- **City Department.** The City of Tampa department to which the contract pertains.
- **Total Amount Requested for pay period.** Provide all dollars you are expecting to receive for the pay period.
- **Total Contract Amount (including change orders).** Provide expected total contract amount. This includes any change orders that may increase or decrease the original contract amount.
- **Signed/Name/Title/Date.** This is your certification that the information provided on the form is accurate.
- **See attached documents.** Check if you have provided any additional documentation relating to the payment data. Located at the bottom middle of the form.
- **Partial Payment.** Check if the payment period is a partial payment, not a final payment. Located at the top right of the form.
- **Final Payment.** Check of this period is the final payment period. Located at the top right of the form.

The following instructions are for information of any and all subcontractors used for the pay period.

- **(Type) of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business or SLBE.
- **Trade/Work Activity.** Indicate the trade, service, or material provided by the subcontractor.
- **SubContractor/SubConsultant/Supplier.** Please indicate status of firm on this contract.
- **Federal ID.** A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **Company Name, Address, Phone & Fax.** Provide company information for verification of payments.
- **Total Subcontract Amount.** Provide total amount of subcontract for subcontractor including change orders.
- **Amount Paid To Date.** Indicate all dollars paid to date for the subcontractor.
- **Amount Pending, Previously Reported.** Indicate any amount previously reported that payments are pending.
- **Amount To Be Paid for this Period.** Provide dollar amount of dollars requested for the pay period.
- **Sub Pay Period Ending Date.** Provide date for which subcontractor invoiced performed work.

Forms must be signed and dated or will be considered incomplete. The company authorized representative must sign and certify the information is true and accurate. Failure to sign this document or return the document unsigned can be cause for determining a company is in non-compliance of Ordinance 2008-89.

If any additional information is required or you have any questions, you may call the Office of Equal Business Opportunity at (813) 274-5522.

AFFIDAVIT OF COMPLIANCE WITH FOREIGN COUNTRIES OF CONCERN PURSUANT TO SECTION 287.138, FLORIDA STATUTES, CONVICTED VENDOR LIST (PUBLIC ENTITY CRIME) PURSUANT TO SECTION 287.133, FLORIDA STATUTES, PROHIBITION AGAINST CONTRACTING WITH SCRUTINIZED COMPANIES PURSUANT TO SECTION 287.135, FLORIDA STATUTES, PROHIBITION AGAINST HUMAN TRAFFICKING PURSUANT TO SECTION 787.06, FLORIDA STATUTES, AND COMPLIANCE WITH E-VERIFY PURSUANT TO SECTION 448.095, FLORIDA STATUTES

The undersigned Affiant, on behalf of the Entity listed below ("Entity"), hereby attests under penalty of perjury as follows:

Public Entity Crimes

1. Affiant understands that a "person" or "affiliate" who has been placed on the "convicted vendor list" following a "conviction" for a "public entity crime" (as those terms are defined in Section 287.133, Florida Statutes) for a period of 36 months following the date of being placed on the convicted vendor list, is ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa. Entities placed on either the "discriminatory vendor list" or "antitrust vendor list" are ineligible to transact business with the City of Tampa.
2. Affiant understands and attests that neither Affiant, nor any person or affiliate of the Entity, nor the Entity have been placed on any of the above referenced vendor lists that would render the Entity ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa.

Scrutinized Companies

3. Affiant understands that pursuant to Section 287.135(2)(a), Florida Statutes, the Entity would be ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa if the Entity is on the "Scrutinized Companies that Boycott Israel List" (created pursuant to Section 215.4725, Florida Statutes) or is engaged in a boycott of Israel. If the value of the contract is one million dollars or more if, at the time of bidding on, submitting a proposal or reply for, or entering into or renewing a contract, the Entity:
    a. Is on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, created pursuant to Section 215.473, Florida Statutes; or
    b. Is engaged in business operations in Cuba or Syria.

4. Affiant attests that neither Affiant nor the Entity are on the Scrutinized Companies that Boycott Israel List, Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, nor are we engaged in a boycott of Israel, and understand that any resulting contract may be terminated for a falsification of this Affidavit.

E-Verify

5. Affiant understands and attests that pursuant to Section 448.095(5), Florida Statutes, the Entity must comply with Florida's E-Verify law to enter into a contract with the City of Tampa.
6. The undersigned Entity is registered with and uses the United States Department of Homeland Security's E-Verify system to verify the work authorization status of all new employees.
7. No public employer has terminated a contract with the Entity pursuant to Section 448.095(5), Florida Statutes, within the year immediately preceding the date of contracting or submitting a bid, proposal or replay to contract with the City of Tampa.
8. Entity is currently in compliance and will remain in compliance, for the duration of any contract with

the City of Tampa, with all requirements of Section 448.095(5), Florida Statutes.

9. Affiant understands and attests that, if there is a good faith belief that the Entity has knowingly violated Section 448.09(1), Florida Statutes, there is an obligation on the part of the City of Tampa to terminate a contract pursuant to Section 448.095(5), Florida Statutes.
10. Affiant understands and attests that, if there is a good faith belief that one of Entity's subcontractor(s) has knowingly violated the Section 448.09(1), Florida Statutes, but the Entity has otherwise complied with its obligations thereunder, then the Entity will be required to immediately terminate the contract with the subcontractor in order to continue providing services to the City of Tampa.

Anti-Human Trafficking

11. Affiant hereby understands and attests that the undersigned Entity does not use coercion of labor or services as those terms are defined in section 787.06(13), Florida Statutes.

Compliance with Foreign Countries of Concern

12. Affiant, on behalf of the Entity attest to the following:
    a. Entity is not owned by the government of a foreign country of concern as defined in Section 287.138, Florida Statutes. (Source: § 287.138(2)(a), Florida Statutes.)

    b. The government of a foreign country of concern does not have a controlling interest in Entity. (Source: § 287.138(2)(b), Florida Statutes.)

    c. Entity is not organized under the laws of, and does not have a principal place of business in a foreign country of concern. (Source: § 287.138(2)(c), Florida Statutes.)

The undersigned is authorized to execute this Affidavit on behalf of Entity.

The undersigned further sayeth naught.

Date: 9/20/2024

(Affiant) Signed: _____

Entity: KOMPAN, Inc.

Name: Eric Lewis

Title: Treasurer

STATE OF Texas
COUNTY OF Travis

SWORN to (or affirmed) and subscribed before me, by means of ☐ physical presence or ☐ online notarization, this 20th day of September, 2024 by ERIC LEWIS, as Treasurer of Kompan Inc who is personally known to me or who has produced personally known as identification.

[AFFIX NOTARY SEAL/STAMP]

LAUREN DEMPSEY
Notary Public, State of Texas
Comm. Expires 10-27-2026
Notary ID 130006697

Signature of Notary

Name: Lauren Dempsey
(Print or Type Name)

Notary Public: State of ~~Florida~~ TX

My Commission Expires: 10/27/26

#VDT8QQYV0D2EO7v1

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 04/04/2023

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 Willis Towers Watson Midwest, Inc. c/o 26 Century Blvd P.O. Box 305191 Nashville, TN 372305191 USA	CONTACT NAME: Willis Towers Watson Certificate Center PHONE (A/C, No, Ext): 1-877-945-7378 FAX (A/C, No): 1-888-467-2378 E-MAIL ADDRESS: certificates@willis.com
	INSURER(S) AFFORDING COVERAGE / NAIC #
	INSURER A: Zurich American Insurance Company 16535
INSURED Evapco Inc. Evapco California, Inc 601 W Howard Lane, Suite 101 Austin, TX 78753	INSURER B: Scottsdale Insurance Company 41297
	INSURER C:
	INSURER D:
	INSURER E:
	INSURER F:

COVERAGES CERTIFICATE NUMBER: W28650384 REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO-JECT LOC OTHER:	Y	Y	GLO 1058275-07	04/01/2023	04/01/2024	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$ 5,000,000 $ 100,000 $ 5,000 $ 5,000,000 $ 5,000,000 $ 5,000,000
A	AUTOMOBILE LIABILITY X ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY SCHEDULED AUTOS NON-OWNED AUTOS ONLY	Y	Y	BAP-0246011-09	04/01/2023	04/01/2024	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ 1,000,000
B	UMBRELLA LIAB X OCCUR X EXCESS LIAB CLAIMS-MADE DED RETENTION $			XL6D001762	04/01/2023	04/01/2024	EACH OCCURRENCE AGGREGATE	$ 5,000,000 $ 5,000,000
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N No If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	Y	WC-0246012-05	04/01/2023	04/01/2024	X PER STATUTE OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	$ 1,000,000 $ 1,000,000 $ 1,000,000

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

Reference Number: 910819688

Re: Parks & Playground Equipment and Various locations

Certificate Holder is included as an Additional Insured as respects to General Liability. General Liability policy shall be Primary and Non-contributory with any other insurance in force for or which may be purchased by Additional

CERTIFICATE HOLDER	CANCELLATION
City of Tampa Insurance Compliance PO Box 100565 - 33 Duluth, GA 30096	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE

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AGENCY CUSTOMER ID: _____

LOC #: _____

ACORD

ADDITIONAL REMARKS SCHEDULE

AGENCY		NAMED INSURED
Willis Towers Watson Midwest, Inc.		Kompan Inc. Kompan California, Inc 605 W Howard Lane, Suite 100 Austin, TX 78753
POLICY NUMBER		
See Page 1		
CARRIER	NAIC CODE	EFFECTIVE DATE: See Page 1
See Page 1	See Page 1	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

Insured(s). Waiver of Subrogation applies in favor of Additional Insured(s) with respects to General Liability.

Certificate Holder is included as an Additional Insured as respects to Auto Liability when required by written contract. Auto Liability policy shall be Primary and Non-contributory with any other insurance in force for or which may be purchased by Additional Insured(s) when required by written contract. Waiver of Subrogation applies in favor of Additional Insured(s) with respects to Auto Liability when required by written contract.

Waiver of Subrogation applies in favor of Certificate Holder/Additional Insured(s) with respects to Workers Compensation as permitted by law.

Additional Insureds/Waiver of Subrogaiton applies to: City, its elected officials, departments, officers, employees, and volunteers together with, as applicable, any associated lander of the City, as to liability arising out of work or operations performed by or on behalf of Firm including materials, parts, or equipment furnished in connection with such work or operations

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GR ID: 23963438 BATCH: 2920400 CERT: W286503B4

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 04/04/2024

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
Willis Towers Watson Midwest, Inc.
c/o 26 Century Blvd
P.O. Box 305191
Nashville, TN 372305191 USA

CONTACT NAME: Willis Towers Watson Certificate Center
PHONE (A/C, No, Ext): 1-877-945-7378 **FAX (A/C, No):** 1-888-467-2378
E-MAIL ADDRESS: certificates@willis.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A: Zurich American Insurance Company	16535
INSURER B: James River Insurance Company	12203
INSURER C:	
INSURER D:	
INSURER E:	
INSURER F:	

INSURED
Kompan Inc.
Kompan California, Inc
605 W Howard Lane, Suite 101
Austin, TX 78753

COVERAGES **CERTIFICATE NUMBER:** W33184695 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR X Owners & Contractors GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO-JECT LOC OTHER:	Y	T	GL01058275-09	04/01/2024	04/01/2025	EACH OCCURRENCE	$	5,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$	250,000
							MED EXP (Any one person)	$	5,000
							PERSONAL & ADV INJURY	$	5,000,000
							GENERAL AGGREGATE	$	5,000,000
							PRODUCTS - COMP/OP AGG	$	5,000,000
								$	
A	AUTOMOBILE LIABILITY X ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY SCHEDULED AUTOS NON-OWNED AUTOS ONLY	Y	T	BAP 0266011 - 06	04/01/2024	04/01/2025	COMBINED SINGLE LIMIT (Ea accident)	$	1,000,000
							BODILY INJURY (Per person)	$	
							BODILY INJURY (Per accident)	$	
							PROPERTY DAMAGE (Per accident)	$	
								$	
B	UMBRELLA LIAB X OCCUR X EXCESS LIAB CLAIMS-MADE DED RETENTION $			00153584-0	04/01/2024	04/01/2025	EACH OCCURRENCE	$	5,000,000
							AGGREGATE	$	5,000,000
								$	
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y / N: No	N/A	T	WC 0246012 - 06	04/01/2024	04/01/2025	X PER STATUTE 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)

This Voids and Replaces Previously Issued Certificate Dated 03/31/2024 WITH ID: W33119288.

Reference Number: 910819688

Re: Parks & Playground Equipment and Various locations

CERTIFICATE HOLDER

City of Tampa
Insurance Compliance
PO Box 100085 - 28
Duluth, GA 30096

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

Mark Vick

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AGENCY CUSTOMER ID: _____

LOC #: _____

ACORD

ADDITIONAL REMARKS SCHEDULE

AGENCY		NAMED INSURED
Willis Towers Watson Midwest, Inc.		Kompan Inc. Kompan California, Inc 605 W Howard Lane, Suite 101 Austin, TX 78753
POLICY NUMBER See Page 1		
CARRIER See Page 1	NAIC CODE See Page 1	EFFECTIVE DATE: See Page 1

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

City, its elected officials, departments, officers, employees, and volunteers together with, as applicable, any associated lender of the City, as to liability arising out of work or operations performed by or on behalf of Firm including materials, parts, or equipment furnished in connection with such work or operations are included as an Additional Insureds as respects to General Liability, Auto Liability and Workers Compensation, when required by written contract and as permitted by law.

Waiver of Subrogation applies in favor of Additional Insureds with respects to General Liability, Auto Liability and Workers Compensation, when required by written contract and as permitted by law.

Coverage for Contractual Liability and Independent Contractors are provided under the General Liability policy.

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SR ID: 25673839 BATCH: 3405092 CERT: W33184695

From: certificates@wtwco.com SMTP:certificates@wtwco.com
To: CityofTampa CityofTampa@Ebix.com
CC:
Subject: Certificate of Insurance Requested for Kompan Inc. Cert Number W33184695 [25673839]
Date: 4/4/2024 7:24:47 AM
Attachment(s):

You don't often get email from certificates@wtwco.com. Learn why this is important

CAUTION: This email originated from outside of the organization! DO NOT click on links or open attachments unless you were expecting the email, recognize the sender, and know the content is safe.

WTW CERTIFICATE CENTER

Please see the enclosed document(s) provided by the WTW Certificate Center. We trust this issuance is in compliance with your needs. However, if you have any questions or wish to discuss it in any way, please do not hesitate to contact us during our hours of operation: 7:00 AM to 7:00 PM (CST).

Please note, we do not automatically mail Proofs of Insurance issued midterm, unless specifically requested. To help ensure the appropriate party receives a copy, please be sure to provide electronic distribution instructions.

Certificate Holders can also access existing proofs of insurance and much more by registering or logging into myportal.proofsdirect.wtwco.com. To register, just a few details are needed from the existing certificate.

Thank you,

Angelo Ferrer

WTW Certificate Center
Phone: 877-945-7378
Fax: 888-467-2378
Email: certificates@wtwco.com
Web: www.wtwco.com

City of Tampa
Jane Castor, Mayor

Purchasing Department
Deanna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E. Hanna Ave.
Tampa, Florida 33610
Office: (813) 274-8351
Fax: (813) 274-8355

M E M O R A N D U M

DATE: July 17, 2024

TO: Lisa Grizzle
Parks & Recreation Administrative Manager
Parks and Recreation

FROM: Theresa Samuel, Purchasing Technician

RE: **REQUEST FOR RENEWAL/RE-BID**

The award for **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421** provided by **LANIER PLANS INC. DBA KORKAT** will expire on **JANUARY 12, 2025**. This award has a one-year renewal period. Per the terms of the contract, the vendor is entitled to request a **3.0%** escalation using the Consumer Price Index.

We are requesting information from you as to your needs relative to renewing the award for the above referenced goods. Please indicate your preference with an **(X)**, for one of the options listed below.

__x__ 1. You want to renew with the current vendor(s). ***Please attach to the Request for Renewal/Re-bid form an explanation as to why it is in the best interest of the Department to Re-new rather than Re-bid. Include a statement that the current pricing has been reviewed and remains fair and reasonable. The information that you provide will appear in the background section of the agenda request form that will appear before City Council. Please submit the MBD-30 payment form (if applicable) to this renewal. The MBD-30 form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the evaluation period.***

a.__x__ Please complete the attached **Vendor Performance Evaluation** form.

b._____ Please complete the attached **MBD-30 Sub-Contractor Payment** form **(if applicable for this renewal).**

	ESTIMATED EXPENDITURE	FUND	COST CENTER	ACCOUNT
FY_____	Controlled by Requisition			
FY_____				

(If funds are to be split between two fiscal years, please indicate the years and amounts)

____ 2. You do not want to renew with this vendor and would like to Re-bid. **Please provide an explanation:**

_____

_____

____ 3.You do not want to renew or re-bid at this time. (Let contract expire).

Please return this document and the requested information to my office by **July 23, 2024,** in order that we may process your request in a timely manner.

Dept. Contact Name (Printed): Danielle Riffenburg **Signature:** _____ **Date:** _____

Please fax to 813-274-8355 or email to theresa.samuel@tampagov.net

VENDOR PERFORMANCE EVALUATION

Name of Vendor Reviewed:	LANIER PLANS INC. DBA KORKAT	
Contract Name & Number:	PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421	
Rating Period	**From: 1/13/24**	**To: Present**

	Place an X for your selection	**Excellent**	**Satisfactory**	**Unsatisfactory**
Delivery/Service completed when required:	Delivered/Service as ordered and to spec?		**x**	
	Timeliness of Product/Service		**x**	
	Quality of Product/Service		**x**	
	Delivery of Products/ Complete/ Undamaged?		**x**	

Please Describe Quality of Product or Service: Products delivered are as expected.

Customer Satisfaction	Communication (Phone, E-Mail, or Fax availability)?		**x**	
	Responsiveness and proper follow up regarding any contractual or performance issues?		**x**	
	Product or Services fulfilled/completed		**x**	

Have you discussed issues with vendor? _____ Yes ___x___ No

Would you like to request a meeting with Purchasing & Vendor? _____Yes ___x___ No

Performance during rating period: Vendor is responsive and provides quality products.

Customer Service Comments: Customer service is as expected.

Dept. Contact Name (Printed): _Danielle Riffenburg_____ **Signature:** Danielle Riffenburg Digitally signed by Danielle Riffenburg Date: 2024.08.29 15:30:43 -04'00'

Rev: 4/20/11

PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

LANIER PLANS INC. DBA KORKAT

Parks and Recreation believes it is in the best interest of the City to renew the contract for Bid #31041421 with LANIER PLANS INC. DBA KORKAT. Maintaining the current contract will allow for efficient maintenance and repair of existing and new equipment installed under this contract. The current pricing has been reviewed and remains fair and reasonable.

City of Tampa
Jane Castor, Mayor

Purchasing Department
DeAnna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E Hanna Avenue
Tampa, Florida 33610

Office (813) 274-8351
Fax: (813) 274-8355

September 13, 2024

Shane Lanier
Lanier Plans, Inc. dba KorKat
221 Cable Industrial Way
Carrollton, GA 30117
ShaneL@KorKat.com

Dear Mr. Lanier:

Your firm has an award with the City of Tampa to provide **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421**

This existing award expires on **JANUARY 12, 2025**. Under the provisions of this award, terms and conditions may be renewed if mutually agreeable to both parties for an additional **one-year** period.

If your firm desires to renew the award, please complete and return the following:

- Statement of Intent
- Form MBD10 – "Schedule of All Sub-Contractors/Consultants/Suppliers Solicited"
- Form MBD20 – "Schedule of Sub-Contractors/Consultants/Suppliers to be Utilized"
- Form MBD50 – "Good Faith Effort Compliance Plan (GFECP) Guidelines"
- Form MBD30 – "Sub-Contractors/Consultant/Suppliers Payments"
- Affidavit of Compliance:
    - FS287.138 Compliance with Foreign Countries of Concern
    - FS287.133 Convicted Vendor List (Public Entity Crimes)
    - FS287.135 Prohibition Against Contracting with Scrutinized Companies
    - FS787.06 Prohibition Against Human Trafficking
    - FS448.095 Compliance With E-Verify

If your firm desires to renew the award, please complete and return the above listed documents. The MBD forms should document any subcontractors that are going to be used to provide goods/services for the award's renewal period and/or if any request for payments has been submitted. If payments were not requested or subcontractors were not used, please mark each form accordingly. **All documents must be submitted for the award/contract to be renewed.**

If you do not wish to renew, please indicate so on the attached Statement of Intent.

Sincerely,

Theresa Samuel
Purchasing Technician
(813) 274-8635
theresa.samuel@tampagov.net

STATEMENT OF INTENT

I, Shane Lanier,

being authorized to contract for Lanier Plans, Inc dba KorKat, do hereby express the firm's desire to renew the above referenced agreement upon the same prices, same terms and conditions. I understand that an extension of the agreement requires the City's approval. This statement represents the above firm's binding approval of an extension of this agreement.

By:  9/13/2024

Authorized Signature Date

Shane Lanier

Type or Print Name Above

Title: CEO

Comments:

( ) We do not wish to renew this award. The source for non-renewal is:

By:  9/13/2024

Authorized Signature Date

Shane Lanier

Type or Print Name Above

Title: CEO

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-10)

Contract No.: 21-P-00417 Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #3104142I

Company Name: Lanier Plans, Inc dba KorKat Address: 221 Cable Industrial Way Carrollton, GA 30117

Federal ID: 86-1063618 Phone: 770-214-9322 Fax: 770-214-9323 Email: ShaneL@KorKat.com

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.

☑ **No Firms were contacted or solicited for this contract.**

☐ **No Firms were contacted because:** _____

☐ **See attached list of additional Firms solicited and all supplemental information (List must comply to this form)**

Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=W/MBE O = Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub–contracting opportunities on this contract.

Signed: _____ Name/Title: Shane Lanier / CEO Date: 9/13/2024

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

Page 2 of 4 – DMI Solicited/Utilized
Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) Solicited Form (Form MBD-10)

This form must be submitted with all bids or proposals. **All** subcontractors (regardless of ownership or size) solicited and subcontractors from whom unsolicited quotations were received must be included on this form. The instructions that follow correspond to the headings on the form required to be completed. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Firms were contacted or solicited for this contract.** Checking the box indicates that a pre-determined Subcontract Goal or Participation Plan Requirement was not set by the City resulting in your business not using subcontractors and will self-perform all work. If during the performance of the contract you employ subcontractors, the City must pre-approve subcontractors. Use of the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: Certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors.
- **No Firms were contacted because.** Provide brief explanation why no firms were contacted or solicited.
- **See attached documents.** Check box, if after you have completed the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the form. All DMI data not submitted on the MBD Form-10 must be in the same format and have all requested data from MBD Form-10 included.

The following instructions are for information of any and all subcontractors solicited.

- **"S" = SLBE, "W" = W/MBE.** Enter "**S**" for firms Certified by the City as Small Local Business Enterprises and/or "**W**" for firms Certified by the City as either Women/Minority Business Enterprise; **"O" = Non-certified others**.
- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification and payment of the contractor/subcontractor.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials** indicate the trade, service, or materials provided by the subcontractor. NIGP codes aka "National Institute of Governmental Purchasing" are listed at top section of document.
- **Contact Method L=letter, F=fax, E=Email, P=Phone.** Indicate with letter the method(s) of soliciting for bid.
- Q**uote or Resp. (response) Rec'd (received) Y/N**. Indicate "Y" Yes if you received a quotation or if you received a response to your solicitation. Indicate "N" No if you received no response to your solicitation from the subcontractor. Must keep records: log, ledger, documentation, etc. that can validate/verify.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Page 3 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.: 21-P-00417 Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #3104421

Company Name:_____ Address:_____

Federal ID:_____ Phone:_____ Fax:_____ Email:_____

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

☐ **See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)**

Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

☑ **No Subcontracting/consulting (of any kind) will be performed on this contract.**

☐ **No Firms are listed to be utilized because:**_____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=W/MBE O =Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %

Total ALL Subcontract / Supplier Utilization $_____

Total SLBE Utilization $ _____

Total W/MBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. _____% Percent W/MBE Utilization of Total Bid/Proposal Amt. _____%

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: _____ Name/Title: Shane Lanier / CEO Date: 9/13/2024

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive Forms must be included with Bid / Proposal

DMI – Solicited/Utilized

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) to be Utilized Form

(Form MBD-20)

This form must be submitted with all bids or proposals. All subcontractors (regardless of ownership or size) projected to be utilized must be included on this form. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

Contract No. This is the number assigned by the City of Tampa for the bid or proposal.

- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Subcontracting/consulting (of any kind) will be performed on this contract.** Checking box indicates your business will not use subcontractors when no Subcontract Goal or Participation Plan Requirement was set by the City, but will self-perform all work. When subcontractors are utilized during the performance of the contract, the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors, including completion and submitting Form-10 and Form-20.
- **No Firms listed To-Be-Utilized.** Check box; provide brief explanation why no firms were retained when a goal or participation plan requirement was set on the contract. **Note: Mandatory compliance with Good Faith Effort outreach (GFECP) requirements applies (MBD Form-50) and supporting documentation must accompany the bid.**
- **See attached documents.** Check box, if after completing the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the scope/value/percent utilization of subcontractors. Reproduce copies of MBD-20 and attach. All data not submitted on duplicate forms must be in the same format and content as specified in these instructions.

The following instructions are for information of Any and All subcontractors To Be Utilized.

- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **"S" = SLBE, "W" = W/MBE.** Enter "**S**" for firms Certified by the City as Small Local Business Enterprises and/or "**W**" for firms Certified by the City as Women/Minority Business Enterprise; **"O" = Non-certified others**.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials (NIGP code if Known)** Indicate the trade, service, or material provided by the subcontractor. Abbreviated list of NIGP is available at http:/www.tampagov.net/mbd "Information Resources".
- **Amount of Quote, Letters of Intent** (required for both SLBEs and W/MBEs).
- **Percent of Work/Contract.** Indicate the percent of the total contract price the subcontract(s) represent. For CCNA only (i.e. Consultant A/E Services) you must indicate subcontracts as percent of total scope/contract.
- **Total Subcontract/Supplier Utilization.** – Provide total dollar amount of all subcontractors/suppliers projected to be used for the contract. (Dollar amounts may be optional in CCNA depending on solicitation format).
- **Total SLBE Utilization.** Provide total dollar amount for all projected SLBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Total W/MBE Utilization.** Provide total dollar amount for all projected W/MBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Percent SLBE Utilization.** Total amount allocated to SLBEs divided by the total bid/proposal amount.
- **Percent W/MBE Utilization.** Total amount allocated to W/MBEs divided by the total bid/proposal amount.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign, and Submit all Forms 10,20, & 50 SHALL render the Bid or Proposal Non-Responsive

Good Faith Effort Compliance Plan (GFECP) Guidelines

for Women/Minority Business Enterprise\Small Local Business Enterprise ParticipationCity of Tampa - Equal Business Opportunity Program

(Form MBD 50 – See detailed instructions on page 3 of 3)

Contract Name PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421 **Bid Date** 9/13/2024

Bidder/Proposer Lanier Plans, Inc dba KorKat

Signature _____ **Date** _____

Name Shane Lanier **Title** CEO

The Compliance Plan with attachments is a true account of Good Faith Efforts (GFE) made to achieve the participation goals as specified for Women/Minority Business Enterprises & Small Local Business Enterprises (W/MBE & SLBE) on the referenced contract:

☐ **W/MBE & SLBE participation Goal is Not Specified for this Solicitation however participation is aspirational and GFECP is required.**

☐ **W/MBE & SLBE participation Goal is Met or Exceeded (refer to Goal-Set Form MBD-90).**

☑ **W/MBE & SLBE participation Goal is Not Fully Achieved (refer to Goal-Set Form MBD-90).**

For each checkbox above Bidders/Proposers shall submit DMI Forms 10 and 20 which accurately report all subcontractors solicited and all subcontractors to-be-utilized. The following list is an overview of the required baseline GFECP action steps for all bids/proposals. Furthermore, it is understood that these GFECP requirements are weighted in the compliance evaluation based on the veracity and demonstrable degree of documentation provided with the bid/proposal:

(Check applicable boxes below - Must enclose supporting documents accordingly with Qualifying Remarks)

(1) Solicited through reasonable and available means the interest of W/MBE & SLBEs that have the capability to perform the work of the contract. The Bidder or Proposer must solicit this interest within enough time to allow the W/MBE & SLBEs to respond. The Bidder or Proposer must take appropriate steps to follow up initial solicitations with interested W/MBE & SLBEs. ☐ **See DMI report forms for subcontractors solicited.** ☐ **See enclosed supplemental data on solicitation efforts.**

☐ **Qualifying Remarks**

(2) Provided interested W/MBE & SLBEs with adequate, specific scope information about the plans, specifications, and requirements of the contract, including addenda, in a timely manner to assist them in responding to the requested scope identified by bidder/proposer for the solicitation. ☐ **See enclosed actual solicitations used.**
☐ **Qualifying Remarks**

(3) Negotiated in good faith with interested W/MBE & SLBEs that have submitted bids (e.g. adjusted quantities or scale). Documentation of negotiation must include the names, addresses, and telephone numbers of W/MBE & SLBEs that were solicited; the date of each such solicitation; a description of the information provided regarding the plans and specifications for the work selected for subcontracting; and evidence as to why agreements could not be reached with W/MBE & SLBEs to perform the work. Additional costs involved in soliciting and using subcontractors is not a sufficient reason for a bidder/proposer's failure to meet goals or achieve participation, as long as such costs are reasonable. Bidders are not required to accept excessive quotes in order to meet the goal.
☐ **DMI Utilized Forms for sub-(contractor/consultant) reflect genuine negotiations** ☐ **This project is an RFQ/RFP in nature and negotiationsare limited to clarifications of scope/percentages, specifications, qualifications and subs fee schedules.**
☐ **See enclosed documentation.**
☐ **Qualifying Remarks**

(4) Not rejecting W/MBE & SLBEs as being unqualified without justification based on a thorough investigation of their capabilities. The W/MBE & SLBEs standing within its industry, membership in specific groups, organizations / associations and political or social affiliations are not legitimate causes for rejecting or not soliciting bids to meet the goals.
☐ **Not applicable.** ☐ **See attached justification for rejection of a subcontractor's bid or proposal.** ☐ **Qualifying Remarks**

(5) Made scope(s) of work available to W/MBE & SLBE subcontractors and suppliers; and, segmented portions of the work or material consistent with the available W/MBE & SLBE subcontractors and suppliers, to facilitate meeting the goal. ☐ **In addition, Sub-Contractors could bid on their own choice of work or trade without restriction to a pre-determined**

portion. □ **See enclosed comments**.□ **Qualifying Remarks**

(6) Made good faith efforts, despite the ability or desire of Bidder/Proposer to perform the sub-tasks of a contract with its own forces/organization. A Bidder/Proposer who desires to self-perform the sub-tasks of a contract must demonstrate good faith efforts if the goal has not been met**.** □ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self-performed by the prime.** □ **Qualifying Remarks w/Documents**

(7) Segmented the portions of the work to be performed by W/MBEs & SLBEs in order to increase the likelihood that the goals will be met. This includes, where appropriate, breaking out contract work items into economically feasible units (quantities/scale) to facilitate W/MBE & SLBE participation, even when the Bidder/Proposer might otherwise prefer to perform these work items with its own forces**.** □ **Sub-Contractors could bid on their own choice of work or trade without restriction to a pre- determined portion.**□ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self- performed by the prime.** □ **See enclosed comments.**□ **Qualifying Remarks**

(8) Made efforts to assist interested W/MBEs & SLBEs in obtaining bonding, lines of credit, or insurance as required by the City or contractor.
□ **See enclosed documentation on initiatives undertaken and methods to accomplish**. □ **Qualifying Remarks**

(9) Made efforts to assist interested W/MBEs & SLBEs in obtaining necessary equipment, supplies, materials, or related assistance or services, including participation in an acceptable mentor-protégé program. □ **See enclosed documentation of initiatives and/or agreements.** □ **Qualifying Remarks**

(10) Effectively used the services of the City and other organizations that provide assistance in the recruitment and placement of W/MBEs & SLBEs.
□ **See enclosed documentation of services engaged.** □ **Overview (attached) of tactical actions and resources employed toward recruitment**

Note: Any unsolicited information in support of your Bid/RFP Compliance must accompany your submittal. □ **Identify Information Submitted**

Participation Plan: Guidance for Complying with Good Faith Efforts Outreach (page 3 of 3)

(1) All firms on the W/MBE & SLBE Goal Setting List must be solicited and documentation provided for email, fax,letters, phone calls, and other methods of outreach/communication with the listed firms. The DMI Solicited and DMI-Utilized forms must be completed for all firms solicited and all firms utilized. Other opportunities for subcontracting should be explored to attain participation. May consult Tampa EBO Office and/or researching the on-line Diversity Management Business System Directory for Tampa certified W/MBE & SLBEfirms.

(2) Solicitation of W/MBE & SLBEs, via written or electronic notification, should provide specific information on the services needed, where plans can be reviewed and assistance offered in obtaining these, if required. Solicitations should be sent a minimum of a week (i.e. 5 city business days or more) before the bid/proposal date. Actual copies of the bidder's solicitation containing their scope-specific instructions should be provided.

(3) With any quotes received, a follow-up should be made when needed to confirm detail scope of work. For anyW/MBE & SLBE low quotes rejected, an explanation shall be provided detailing negotiation efforts.

(4) If a low bid W/MBE & SLBE is rejected or deemed unqualified the contractor must provide an explanation and supporting documentation for this decision.

(5) Prime shall break down portions of work into economical feasible opportunities for subcontracting. The W/MBE & SLBE directory may be useful in identifying additional subcontracting opportunities and certified firms not listed in the "W/MBE & SLBE Goal Setting Firms Contact List."

(6) Contractor shall not preclude W/MBE & SLBEs from bidding on any part of work, even if the Contractor may desire to self-perform aspects of the work.

(7) Contractor shall avoid relying solely on subcontracting those scopes of work where W/MBE & SLBE availabilityis not sufficient to attain pre-determined goals; including RFP/RFQ solicitations, all of which require GFECPcompliance to achieve sub-consultant participation.

(8) In its solicitations, the Bidder should offer assistance to W/MBE & SLBEs in obtaining bonding, insurance, et cetera, if required of subcontractors by the City or Prime Contractor.

(9) In its solicitation, the Bidder should offer assistance in obtaining equipment for a specific job to W/MBE & SLBEs, if needed. This includes mobilization where applicable.

(10) Contractor should use the services offered by such agencies as the Small Business Development Center (SBDC) @ University South Fla.; SBDC @ Hillsborough County Entrepreneur Collaborative Center; Hillsborough NAACP Empowerment Center; Hillsborough County Economic Development Department DM/DWBE/SBE Program and Prospera-Hispanic Business Assoc. to name a few for the recruitment and placement of available WMBEs/SLBEs.

City of Tampa – DMI Sub-(Contractors/Consultants/Suppliers) Payments

(FORM MBD-30)

[ ] Partial [ ] Final

Contract No.: 21-P-00417 WO#,(if any): _____ Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #3104142I

Contractor Name: _____ Address: 221 Cable Industrial Way Carrollton, GA 30117

Federal ID: 86-1063618 Phone: 770-214-9322 Fax: 770-214-9323 Email: ShaneL@KorKat.com

GC Pay Period: _____ Payment Request/Invoice Number: _____ City Department: _____

Total Amount Requested for pay period: $_____ Total Contract Amount (including change orders):$_____

-Type of Ownership - (F=Female M=Male), BF BM = African Am., HF HM = Hispanic Am., AF AM = Asian Am., NF NM = Native Am., CF CM = Caucasian S = SLBE

Type Trade/Work Activity []Sub []Supplier Federal ID	Company Name Address Phone & Fax	Total Sub Contract Or PO Amount	Amount Paid To Date Amount Pending Previously Reported	Amount To Be Paid For This Period Sub Pay Period Ending Date
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$

(Modifying This Form or Failure to Complete and Sign May Result in Non-Compliance)

Certification: I hereby certify that the above information is a true and accurate account of payments to sub – contractors/consultants on this contract.

Signed: _____ Name/Title: CEO Date: 9/13/2024

Note: Detailed Instructions for completing this form are on the next page

Page 2 of 2 – DMI Payment

Instructions for completing The DMI Sub-(Contractors/Consultants/ Suppliers) Payment Form (Form MBD-30)

This form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the pay period. If applicable, after payment has been made to the subcontractor, "Waiver and Release of Lien upon Progress Payment", "Affidavit of Contractor in Connection with Final Payment", or an affidavit of payment must be submitted with the amount paid for the pay period. The following will detail what data is required for this form. The instructions that follow correspond to the headings on the form required to be completed. **(Modifying or omitted information from this form my result in non-compliance).**

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **W.O.#** If the report covers a work order number (W.O.#) for the contract, please indicate it in that space.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business.
- **Address.** The physical address of your business.
- **Federal ID.** A number assigned to a business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **Pay Period.** Provide start and finish dates for pay period. (e.g. 05/01/13 – 05/31/13)
- **Payment Request/Invoice Number.** Provide sequence number for payment requests. (ex. Payment one, write 1 in space, payment three, write 3 in space provided.)
- **City Department**. The City of Tampa department to which the contract pertains.
- **Total Amount Requested for pay period.** Provide all dollars you are expecting to receive for the pay period.
- **Total Contract Amount (including change orders).** Provide expected total contract amount. This includes any change orders that may increase or decrease the original contract amount.
- **Signed/Name/Title/Date**. This is your certification that the information provided on the form is accurate.
- **See attached documents.** Check if you have provided any additional documentation relating to the payment data. Located at the bottom middle of the form.
- **Partial Payment.** Check if the payment period is a partial payment, not a final payment. Located at the top right of the form.
- **Final Payment.** Check of this period is the final payment period. Located at the top right of the form.

The following instructions are for information of any and all subcontractors used for the pay period.

- **(Type) of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business or SLBE.
- **Trade/Work Activity.** Indicate the trade, service, or material provided by the subcontractor.
- **SubContractor/SubConsultant/Supplier.** Please indicate status of firm on this contract.
- **Federal ID.** A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Total Subcontract Amount.** Provide total amount of subcontract for subcontractor including change orders.
- **Amount Paid To Date.** Indicate all dollars paid to date for the subcontractor.
- **Amount Pending, Previously Reported.** Indicate any amount previously reported that payments are pending.
- **Amount To Be Paid for this Period.** Provide dollar amount of dollars requested for the pay period.
- **Sub Pay Period Ending Date.** Provide date for which subcontractor invoiced performed work.

Forms must be signed and dated or will be considered incomplete. The company authorized representative must sign and certify the information is true and accurate. Failure to sign this document or return the document unsigned can be cause for determining a company is in non-compliance of Ordinance 2008-89.

If any additional information is required or you have any questions, you may call the Office of Equal Business Opportunity at (813) 274-5522.

AFFIDAVIT OF COMPLIANCE WITH FOREIGN COUNTRIES OF CONCERN PURSUANT TO SECTION 287.138, FLORIDA STATUTES, CONVICTED VENDOR LIST (PUBLIC ENTITY CRIME) PURSUANT TO SECTION 287.133, FLORIDA STATUTES, PROHIBITION AGAINST CONTRACTING WITH SCRUTINIZED COMPANIES PURSUANT TO SECTION 287.135, FLORIDA STATUTES, PROHIBITION AGAINST HUMAN TRAFFICKING PURSUANT TO SECTION 787.06, FLORIDA STATUTES, AND COMPLIANCE WITH E-VERIFY PURSUANT TO SECTION 448.095, FLORIDA STATUTES

The undersigned Affiant, on behalf of the Entity listed below ("Entity"), hereby attests under penalty of perjury as follows:

Public Entity Crimes

1. Affiant understands that a "person" or "affiliate" who has been placed on the "convicted vendor list" following a "conviction" for a "public entity crime" (as those terms are defined in Section 287.133, Florida Statutes) for a period of 36 months following the date of being placed on the convicted vendor list, is ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa. Entities placed on either the "discriminatory vendor list" or "antitrust vendor list" are ineligible to transact business with the City of Tampa.
2. Affiant understands and attests that neither Affiant, nor any person or affiliate of the Entity, nor the Entity have been placed on any of the above referenced vendor lists that would render the Entity ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa.

Scrutinized Companies

3. Affiant understands that pursuant to Section 287.135(2)(a), Florida Statutes, the Entity would be ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa if the Entity is on the "Scrutinized Companies that Boycott Israel List" (created pursuant to Section 215.4725, Florida Statutes) or is engaged in a boycott of Israel. If the value of the contract is one million dollars or more if, at the time of bidding on, submitting a proposal or reply for, or entering into or renewing a contract, the Entity:
    a. Is on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, created pursuant to Section 215.473, Florida Statutes; or
    b. Is engaged in business operations in Cuba or Syria.

4. Affiant attests that neither Affiant nor the Entity are on the Scrutinized Companies that Boycott Israel List, Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, nor are we engaged in a boycott of Israel, and understand that any resulting contract may be terminated for a falsification of this Affidavit.

E-Verify

5. Affiant understands and attests that pursuant to Section 448.095(5), Florida Statutes, the Entity must comply with Florida's E-Verify law to enter into a contract with the City of Tampa.
6. The undersigned Entity is registered with and uses the United States Department of Homeland Security's E-Verify system to verify the work authorization status of all new employees.
7. No public employer has terminated a contract with the Entity pursuant to Section 448.095(5), Florida Statutes, within the year immediately preceding the date of contracting or submitting a bid, proposal or replay to contract with the City of Tampa.
8. Entity is currently in compliance and will remain in compliance, for the duration of any contract with

the City of Tampa, with all requirements of Section 448.095(5), Florida Statutes.

9. Affiant understands and attests that, if there is a good faith belief that the Entity has knowingly violated Section 448.09(1), Florida Statutes, there is an obligation on the part of the City of Tampa to terminate a contract pursuant to Section 448.095(5), Florida Statutes.
10. Affiant understands and attests that, if there is a good faith belief that one of Entity's subcontractor(s) has knowingly violated the Section 448.09(1), Florida Statutes, but the Entity has otherwise complied with its obligations thereunder, then the Entity will be required to immediately terminate the contract with the subcontractor in order to continue providing services to the City of Tampa.

Anti-Human Trafficking

11. Affiant hereby understands and attests that the undersigned Entity does not use coercion of labor or services as those terms are defined in section 787.06(13), Florida Statutes.

Compliance with Foreign Countries of Concern

12. Affiant, on behalf of the Entity attest to the following:
    a. Entity is not owned by the government of a foreign country of concern as defined in Section 287.138, Florida Statutes. (Source: § 287.138(2)(a), Florida Statutes.)

    b. The government of a foreign country of concern does not have a controlling interest in Entity. (Source: § 287.138(2)(b), Florida Statutes.)

    c. Entity is not organized under the laws of, and does not have a principal place of business in a foreign country of concern. (Source: § 287.138(2)(c), Florida Statutes.)

The undersigned is authorized to execute this Affidavit on behalf of Entity.

The undersigned further sayeth naught.

Date: 9/13/2024

(Affiant) Signed: Shane Lanier

Entity: Lanier Plans Inc. DBA KorKat

Name: Shane Lanier

Title: CEO

STATE OF Georgia
COUNTY OF Carroll

SWORN to (or affirmed) and subscribed before me, by means of ☑ physical presence or ☐ online notarization, this 13th day of September, 2024, by Shane Lanier, as CEO, who is personally known to me or who has produced Drivers License as identification.

[AFFIX NOTARIAL SEAL/STAMP]

JULIE R CREWS
Commission Expires
NOTARY PUBLIC
08-23-2026
CARROLL COUNTY, GEORGIA

Signature of Notary

Name: Julie Crews
(Print or Type Name)

Notary Public: State of Florida
My Commission Expires: 8/23/2026

#VDT8QQYV0D2EO7v1

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 5/1/2024

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	CONTACT NAME:
Sterling Seacrest Pritchard, Inc. 2500 Cumberland Pkwy Suite 400 Atlanta GA 30339 License#: 70726	PHONE (A/C, No, Ext): 678-424-6500 FAX (A/C, No): E-MAIL ADDRESS:

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Frankenmuth Insurance Co	13986
INSURER B : Burlington Insurance Company	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
Lanier Plans, Inc dba KorKat
221 Cable Industrial Blvd
Carrollton GA 30117-5290
LANIPLA-01

COVERAGES **CERTIFICATE NUMBER:** 1703595222 **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	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO-JECT LOC OTHER:			4358GC02526-04	4/15/2024	4/15/2025	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$ 1,000,000 $ 100,000 $ 5,000 $ 1,000,000 $ 2,000,000 $ 2,000,000
A	AUTOMOBILE LIABILITY X ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY SCHEDULED AUTOS NON-OWNED AUTOS ONLY			6738360	4/15/2024	4/15/2025	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ 1,000,000
B	X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED X RETENTION $			4358E01979-04	4/15/2024	4/15/2025	EACH OCCURRENCE AGGREGATE	$ 5,000,000 $ 5,000,000
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N Y	N / A	6738359	4/15/2024	4/15/2025	X PER STATUTE OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	$ 1,000,000 $ 1,000,000 $ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Business Auto Liability:
19348 08 22 - Additional Insured, Waiver of Subrogation, & Primary & Non-contributory
Workers Compensation:
WC 00 03 13 - Waiver of Our Right to Recover from Others Endorsement
General Liability:
CG 20 37 07 04 - Blanket Additional Insured - Completed Operations
CG 20 37 12 19 - Blanket Additional Insured - Ongoing Operations
CG 24 04 12 19 - Blanket Waiver of Subrogation
See Attached...

CERTIFICATE HOLDER

City of Tampa
Risk Management Department
306 East Jackson Street
Tampa FL 33602
United States

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

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AGENCY CUSTOMER ID: LANIPLA-01

LOC #:

ADDITIONAL REMARKS SCHEDULE

AGENCY	NAMED INSURED
Sterling Seacrest Pritchard, Inc.	Lanier Plans, Inc dba KorKat 221 Cable Industrial Blvd Carrollton GA 30117-5290
POLICY NUMBER	
CARRIER / NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE

IFG-I-0155 11 00 - Notice of Cancellation
IFG-G-0094 03 17 - Primary & Non-Contributory
Excess Liability:
IFG-FX-0001 07 17 - Commercial Excess Liability Coverage Form

Project: Parks Site Furnishings, Playground Equipment & Surfacing, Installation, Repairs & Replacement

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From: customerservice@certsonline.com
From:
From: customerservice@certsonline.com
Subject: Upload Via Web
05-01-2024Attachment(s):Lanier_Plans__Inc._dba_Korkat_5.1.24.pdf

Client Name: City of Tampa;Vendor Number: 861063618;Vendor Name: Lanier Plans, Inc.;Document Uploaded By: Penny Hammock;Date Uploaded: 5/1/2024 6:33:57 AM ;Comment: N/A

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

DIAMOND AUTO PREMIER ENDORSEMENT

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM

This endorsement is subject to the provisions applying to the Business Auto Coverage Form, except as described below.

SECTION 1 – WHO IS AN INSURED EXTENSIONS AND ADDITIONAL INTEREST COVERAGES

A. SECTION II – LIABILITY COVERAGE, Paragraph A. Coverage, 1. Who Is An Insured is changed by adding the following:

1. Subsidiaries As Insureds

Any legally incorporated subsidiary in which you own more than 50% of the voting stock on the effective date of this Coverage. However, the Named Insured does not include any subsidiary that is an "insured" under any other automobile policy or would be an "insured" under such a policy but for its termination or the exhaustion of its Limits of Insurance.

2. Automatic Insured Status for Newly Formed or Acquired Organizations

Any organization that is newly acquired or formed by you and over which you maintain majority ownership will qualify as a Named Insured if there is no other similar insurance available to that organization. However:

a. Coverage under this provision is afforded only until the 180th day after you acquire or form the organization or the end of the policy period, whichever is earlier; and

b. Coverage does not apply to:

(1) Newly formed or acquired joint ventures or partnerships;

(2) "Bodily injury" or "property damage" resulting from an "accident" that occurred before you formed or acquired the organization; and

(3) Any insured under any other automobile liability policy or would be an insured under such a policy but for the termination of coverage or the exhaustion of policy liability limits of insurance.

3. Employees as Insureds

Your "employees" are insureds while using a covered "auto" in your business or your personal affairs, provided you do not own, hire, or borrow that "auto".

4. Hired Auto Liability For Employees

An "employee" of yours is an "insured" while operating an "auto" hired or rented under a contract or agreement in that "employee's" name, with your permission, while performing duties related to the conduct of your business.

5. Automatic Additional Interest

Any person or organization whom you are required to add as an Additional Insured on this policy under a written contract or written agreement in effect on the date of the "accident"; and signed by all parties prior to the "accident".

This person or organization is an Additional Insured to the extent you are liable for an "accident" caused in whole or in part, using a covered "auto" being driven by you or any "insured".

B. Primary and Noncontributory – Other Insurance Condition

SECTION IV – BUSINESS AUTO CONDITIONS, Paragraph **B.5. Other Insurance Condition** is changed. The following is added to the and supersedes any provision to the contrary:

1. This insurance is primary to and will not seek contribution from any other insurance available to an Additional Insured under your policy provided that:

a. The Additional Insured is a Named Insured under such other insurance; and

b. You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to the Additional Insured.

2. Regardless of the written contract or written agreement between you and an Additional Insured, this insurance is excess over any other insurance whether primary, excess, contingent or any other basis for which the Additional Insured has been added as additional insured on other policies.
3. The most we will pay on behalf of the Additional Insured is the amount of insurance required in writing in a contract or agreement; or available under the applicable Limits of Insurance shown in the Declarations; whichever is less.

C. Automatic Waiver of Transfer of Rights of Recovery Against Others To Us

Paragraph **A.5. Transfer Of Rights Of Recovery Against Others To Us** of **SECTION IV – BUSINESS AUTO CONDITIONS** is changed with the addition of the following:

The Transfer of Rights Of Recovery Against Others To Us Condition does not apply to any person(s) or organization(s) for whom you are required to waive subrogation with respect to the coverage provided under this Coverage Form, but only to the extent that subrogation is waived:

1. Under a written contract or written agreement with such person(s) or organization(s); and
2. Prior to the "accident" or the "loss".

SECTION 2 – LIABILITY EXTENSIONS AND ADDITIONAL COVERAGES

A. Bodily Injury Coverage Extension – Mental Anguish

SECTION V – DEFINITIONS, C. "Bodily Injury" is deleted and replaced by the following:

"Bodily injury" means bodily injury, sickness or disease sustained by a person, including mental anguish and death sustained by the same person that results from such bodily injury, sickness, or disease. "Bodily injury" does not include mental anguish or death that does not result from bodily injury, sickness, or disease.

B. Certain Trailers And Temporary Substitute Autos Coverage Extension

SECTION I – COVERED AUTOS, Paragraph **C.1.** is changed by the following:

Gross Vehicle Weight Rating of 3,000 pounds is deleted and replaced with Gross Vehicle Weight Rating of 5,000 pounds.

C. Coverage for Certain Operations In Connection with Railroads

With regards to the use of covered "autos" in operations for or affecting a railroad:

1. **SECTION V – DEFINITIONS, H.** "Insured contract", **3.** is deleted and replaced by the following:
   3. An easement or license agreement;
2. **SECTION V – DEFINITIONS, H.** "Insured contract", **a.** is deleted.

D. Covered Autos Coverage Extension

If **SECTION 1 COVERED AUTOS** is provided as Symbol 1 Any "Auto" then any "auto" includes mobile equipment subject to compulsory or financial responsibility or other motor vehicle insurance law only.

Covered mobile equipment includes only those "autos" that are land vehicles and that would qualify under the definition of "mobile equipment" under this policy if they were not subject to a compulsory or financial responsibility law or other motor vehicle insurance law where they are licensed or principally garaged.

E. Drive Other Car – Automatic Coverage for Executive Officers

1. Changes in **SECTION II – COVERED AUTOS LIABILITY COVERAGE**
   a. If Covered Auto Liability, Auto Medical Payments, Comprehensive, Specified Causes of Loss, Collision, or Uninsured and Underinsured Motorist is shown in the Declarations for any private passenger auto, then the same type of coverage is provided for Drive Other Car – Automatic Coverage for Executive Officer.
   b. Any "auto" you don't own, hire, or borrow is a covered "auto" while being used by any "executive officer" or by his or her spouse while a resident of the same household except:
      (1) Any "auto" owned by that "executive officer" or by any member of his or her household.
      (2) Any "auto" used by that "executive officer" or his or her spouse while working in a business of selling, servicing, repairing, or parking "autos".

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Policy No. 6738359 Agent No. 0100088

WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY **WC 00 03 13**
(Ed. 4-84)

WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

This agreement shall not operate directly or indirectly to benefit anyone not named in the Schedule.

Schedule

Any person or organization with whom the insured agrees
to waive subrogation in a written contract.

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective Policy No. Endorsement No.
Insured Premium

Insurance Company Countersigned by_____

WC 00 03 13
(Ed. 4-84)

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location(s) Of Covered Operations
Any person or organization for whom you are performing operations, but only if you have agreed, in a written contract, to add such person or organization as an additional insured on your policy for that location or part thereof, provided such a written contract is fully executed prior to an "occurrence" in which coverage is sought under this policy.	Any location(s) of your covered operations.
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

A. **Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

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C. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or

2. Available under the applicable limits of insurance;

whichever is less.

This endorsement shall not increase the applicable limits of insurance.

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location And Description Of Completed Operations
Any owner, lessee or contractor with whom you have agreed, in a written contract, that such person or organization should be added as an additional insured on your policy, provided such written contract is fully executed prior to an "occurrence" in which coverage is sought under this policy.	Any and all of your completed operations.
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

A. **Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the Schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable limits of insurance;

whichever is less.

This endorsement shall not increase the applicable limits of insurance.

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US (WAIVER OF SUBROGATION)

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
ELECTRONIC DATA LIABILITY COVERAGE PART
LIQUOR LIABILITY COVERAGE PART
POLLUTION LIABILITY COVERAGE PART DESIGNATED SITES
POLLUTION LIABILITY LIMITED COVERAGE PART DESIGNATED SITES
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART
RAILROAD PROTECTIVE LIABILITY COVERAGE PART
UNDERGROUND STORAGE TANK POLICY DESIGNATED TANKS

SCHEDULE

Name Of Person(s) Or Organization(s):
Any person or organization with whom you have agreed, in a written contract to waive the transfer of rights of recovery against others to us, provided such written waiver is fully executed prior to an "occurrence" in which coverage is sought under this policy.
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The following is added to Paragraph **8. Transfer Of Rights Of Recovery Against Others To Us** of **Section IV – Conditions:**

We waive any right of recovery against the person(s) or organization(s) shown in the Schedule above because of payments we make under this Coverage Part. Such waiver by us applies only to the extent that the insured has waived its right of recovery against such person(s) or organization(s) prior to loss. This endorsement applies only to the person(s) or organization(s) shown in the Schedule above.

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POLICY NUMBER: 435BG02526-04

NAMED INSURED: Lanier Plans, Inc. dba KorKat

INSURANCE COMPANY: The Burlington Insurance Company

PRODUCER: CRC Insurance Services, Inc.

AMENDMENT - CANCELLATION NOTICE

Schedule

Type of Policy:	Commercial General Liability Policy	
Policy Term:	Effective Date 04-15-2024	Expiration Date 04-15-2025
Mail Cancellation Notice to:	Fairway Construction, Co., Inc; Azalea Senior Village, LP PO Box 7688 Columbia, MO 65205	
Number of Days notice:	30 days, except 10 days for Non-Payment of premium.	

We shall endeavor to mail written notice of cancellation to the entity(ies) listed in the schedule above giving the number of days shown above in advance of the date of cancellation, but failure to do so shall impose no obligation or liability of any kind upon us, our agents, or our representatives.

ALL OTHER TERMS AND CONDITIONS OF THIS POLICY REMAIN UNCHANGED.

POLICY NUMBER: 435BG02526-04

NAMED INSURED: Lanier Plans, Inc. dba KorKat

INSURANCE COMPANY: The Burlington Insurance Company

PRODUCER: CRC Insurance Services, Inc.

AMENDMENT - CANCELLATION NOTICE

Schedule

Type of Policy:	Commercial General Liability Policy	
Policy Term:	Effective Date 04-15-2024	Expiration Date 04-15-2025
Mail Cancellation Notice to:	Caddell Construction Co, LLC 2700 Lagoon Dr Montgomery, AL 36109	
Number of Days notice:	30 days, except 10 days for Non-Payment of premium.	

We shall endeavor to mail written notice of cancellation to the entity(ies) listed in the schedule above giving the number of days shown above in advance of the date of cancellation, but failure to do so shall impose no obligation or liability of any kind upon us, our agents, or our representatives.

ALL OTHER TERMS AND CONDITIONS OF THIS POLICY REMAIN UNCHANGED.

POLICY NUMBER: 435BG02526-04

NAMED INSURED: Lanier Plans, Inc. dba KorKat

INSURANCE COMPANY: The Burlington Insurance Company

PRODUCER: CRC Insurance Services, Inc.

AMENDMENT - CANCELLATION NOTICE

Schedule

Type of Policy:	Commercial General Liability Policy	
Policy Term:	Effective Date 04-15-2024	Expiration Date 04-15-2025
Mail Cancellation Notice to:	Department of the Army 100 W Oglethorpe Ave. Savannah, GA 31401	
Number of Days notice:	30 days, except 10 days for Non-Payment of premium.	

We shall endeavor to mail written notice of cancellation to the entity(ies) listed in the schedule above giving the number of days shown above in advance of the date of cancellation, but failure to do so shall impose no obligation or liability of any kind upon us, our agents, or our representatives.

ALL OTHER TERMS AND CONDITIONS OF THIS POLICY REMAIN UNCHANGED.

POLICY NUMBER: 435BG02526-04

NAMED INSURED: Lanier Plans, Inc. dba KorKat

INSURANCE COMPANY: The Burlington Insurance Company

PRODUCER: CRC Insurance Services, Inc.

AMENDMENT - CANCELLATION NOTICE

Schedule

Type of Policy:	Commercial General Liability Policy	
Policy Term:	Effective Date 04-15-2024	Expiration Date 04-15-2025
Mail Cancellation Notice to:	Choate Construction Company 8200 Roberts Dr Suite 600 Atlanta, GA 30350	
Number of Days notice:	30 days, except 10 days for Non-Payment of premium.	

We shall endeavor to mail written notice of cancellation to the entity(ies) listed in the schedule above giving the number of days shown above in advance of the date of cancellation, but failure to do so shall impose no obligation or liability of any kind upon us, our agents, or our representatives.

ALL OTHER TERMS AND CONDITIONS OF THIS POLICY REMAIN UNCHANGED.

POLICY NUMBER: 435BG02526-04

NAMED INSURED: Lanier Plans, Inc. dba KorKat

INSURANCE COMPANY: The Burlington Insurance Company

PRODUCER: CRC Insurance Services, Inc.

AMENDMENT - CANCELLATION NOTICE

Schedule

Type of Policy:	Commercial General Liability Policy	
Policy Term:	Effective Date 04-15-2024	Expiration Date 04-15-2025
Mail Cancellation Notice to:	Orange County Division of Building & Safety 201 S. Rosalind Ave. Orlando, FL 32802	
Number of Days notice:	30 days, except 10 days for Non-Payment of premium.	

We shall endeavor to mail written notice of cancellation to the entity(ies) listed in the schedule above giving the number of days shown above in advance of the date of cancellation, but failure to do so shall impose no obligation or liability of any kind upon us, our agents, or our representatives.

ALL OTHER TERMS AND CONDITIONS OF THIS POLICY REMAIN UNCHANGED.

POLICY NUMBER: 435BG02526-04

NAMED INSURED: Lanier Plans, Inc. dba KorKat

INSURANCE COMPANY: The Burlington Insurance Company

PRODUCER: CRC Insurance Services, Inc.

AMENDMENT - CANCELLATION NOTICE

Schedule

Type of Policy:	Commercial General Liability Policy	
Policy Term:	Effective Date 04-15-2024	Expiration Date 04-15-2025
Mail Cancellation Notice to:	Citigroup Technology, Inc. c/o myCOI 1075 Broad Ripple Ave. Indianapolis, IN 46220	
Number of Days notice:	30 days, except 10 days for Non-Payment of premium.	

We shall endeavor to mail written notice of cancellation to the entity(ies) listed in the schedule above giving the number of days shown above in advance of the date of cancellation, but failure to do so shall impose no obligation or liability of any kind upon us, our agents, or our representatives.

ALL OTHER TERMS AND CONDITIONS OF THIS POLICY REMAIN UNCHANGED.

POLICY NUMBER: 435BG02526-04

NAMED INSURED: Lanier Plans, Inc. dba KorKat

INSURANCE COMPANY: The Burlington Insurance Company

PRODUCER: CRC Insurance Services, Inc.

AMENDMENT - CANCELLATION NOTICE

Schedule

Type of Policy:	Commercial General Liability Policy	
Policy Term:	Effective Date 04-15-2024	Expiration Date 04-15-2025
Mail Cancellation Notice to:	Fairway Construction Co., Inc.; Havenwood Cartersville, LP PO Box 7688 Columbia, MO 65202	
Number of Days notice:	30 days, except 10 days for Non-Payment of premium.	

We shall endeavor to mail written notice of cancellation to the entity(ies) listed in the schedule above giving the number of days shown above in advance of the date of cancellation, but failure to do so shall impose no obligation or liability of any kind upon us, our agents, or our representatives.

ALL OTHER TERMS AND CONDITIONS OF THIS POLICY REMAIN UNCHANGED.

POLICY NUMBER: 435BG02526-04

NAMED INSURED: Lanier Plans, Inc. dba KorKat

INSURANCE COMPANY: The Burlington Insurance Company

PRODUCER: CRC Insurance Services, Inc.

AMENDMENT - CANCELLATION NOTICE

Schedule

Type of Policy:	Commercial General Liability Policy	
Policy Term:	Effective Date 04-15-2024	Expiration Date 04-15-2025
Mail Cancellation Notice to:	Blaine Construction Corporation 6510 Deane Hill Drive Knoxville, TN 37919	
Number of Days notice:	30 days, except 10 days for Non-Payment of premium.	

We shall endeavor to mail written notice of cancellation to the entity(ies) listed in the schedule above giving the number of days shown above in advance of the date of cancellation, but failure to do so shall impose no obligation or liability of any kind upon us, our agents, or our representatives.

ALL OTHER TERMS AND CONDITIONS OF THIS POLICY REMAIN UNCHANGED.

POLICY NUMBER: 435BG02526-04

NAMED INSURED: Lanier Plans, Inc. dba KorKat

INSURANCE COMPANY: The Burlington Insurance Company

PRODUCER: CRC Insurance Services, Inc.

AMENDMENT - CANCELLATION NOTICE

Schedule

Type of Policy:	Commercial General Liability Policy	
Policy Term:	Effective Date 04-15-2024	Expiration Date 04-15-2025
Mail Cancellation Notice to:	Parrish Construction Group, Inc. 221 Industrial Park Drive Perry, GA 31069	
Number of Days notice:	30 days, except 10 days for Non-Payment of premium.	

We shall endeavor to mail written notice of cancellation to the entity(ies) listed in the schedule above giving the number of days shown above in advance of the date of cancellation, but failure to do so shall impose no obligation or liability of any kind upon us, our agents, or our representatives.

ALL OTHER TERMS AND CONDITIONS OF THIS POLICY REMAIN UNCHANGED.

POLICY NUMBER: 435BG02526-04

NAMED INSURED: Lanier Plans, Inc. dba KorKat

INSURANCE COMPANY: The Burlington Insurance Company

PRODUCER: CRC Insurance Services, Inc.

AMENDMENT - CANCELLATION NOTICE

Schedule

Type of Policy:	Commercial General Liability Policy	
Policy Term:	Effective Date 04-15-2024	Expiration Date 04-15-2025
Mail Cancellation Notice to:	DR Horton, Inc. its affiliates and subsidiaries c/o Insurance Compliance PO Box 100085-DR Duluth, GA 30096	
Number of Days notice:	30 days, except 10 days for Non-Payment of premium.	

We shall endeavor to mail written notice of cancellation to the entity(ies) listed in the schedule above giving the number of days shown above in advance of the date of cancellation, but failure to do so shall impose no obligation or liability of any kind upon us, our agents, or our representatives.

ALL OTHER TERMS AND CONDITIONS OF THIS POLICY REMAIN UNCHANGED.

POLICY NUMBER: 435BG02526-04

NAMED INSURED: Lanier Plans, Inc. dba KorKat

INSURANCE COMPANY: The Burlington Insurance Company

PRODUCER: CRC Insurance Services, Inc.

AMENDMENT - CANCELLATION NOTICE

Schedule

Type of Policy:	Commercial General Liability Policy	
Policy Term:	Effective Date 04-15-2024	Expiration Date 04-15-2025
Mail Cancellation Notice to:	Smart Ride, Inc. 509 Live Oak Street Edgewater, FL 32132	
Number of Days notice:	30 days, except 10 days for Non-Payment of premium.	

We shall endeavor to mail written notice of cancellation to the entity(ies) listed in the schedule above giving the number of days shown above in advance of the date of cancellation, but failure to do so shall impose no obligation or liability of any kind upon us, our agents, or our representatives.

ALL OTHER TERMS AND CONDITIONS OF THIS POLICY REMAIN UNCHANGED.

POLICY NUMBER: 435BG02526-04

NAMED INSURED: Lanier Plans, Inc. dba KorKat

INSURANCE COMPANY: The Burlington Insurance Company

PRODUCER: CRC Insurance Services, Inc.

AMENDMENT - CANCELLATION NOTICE

Schedule

Type of Policy:	Commercial General Liability Policy	
Policy Term:	Effective Date 04-15-2024	Expiration Date 04-15-2025
Mail Cancellation Notice to:	BH Management Services, LLC c/o Compliance Depot PO Box 115006 Carrollton, TX 75011	
Number of Days notice:	30 days, except 10 days for Non-Payment of premium.	

We shall endeavor to mail written notice of cancellation to the entity(ies) listed in the schedule above giving the number of days shown above in advance of the date of cancellation, but failure to do so shall impose no obligation or liability of any kind upon us, our agents, or our representatives.

ALL OTHER TERMS AND CONDITIONS OF THIS POLICY REMAIN UNCHANGED.

POLICY NUMBER: 435BG02526-04

NAMED INSURED: Lanier Plans, Inc. dba KorKat

INSURANCE COMPANY: The Burlington Insurance Company

PRODUCER: CRC Insurance Services, Inc.

AMENDMENT - CANCELLATION NOTICE

Schedule

Type of Policy:	Commercial General Liability Policy	
Policy Term:	Effective Date 04-15-2024	Expiration Date 04-15-2025
Mail Cancellation Notice to:	Corvias Construction Partners, LLC; Corvias Construction, LLC 601 13th St NW 9th Floor Washington, DC 20005	
Number of Days notice:	30 days, except 10 days for Non-Payment of premium.	

We shall endeavor to mail written notice of cancellation to the entity(ies) listed in the schedule above giving the number of days shown above in advance of the date of cancellation, but failure to do so shall impose no obligation or liability of any kind upon us, our agents, or our representatives.

ALL OTHER TERMS AND CONDITIONS OF THIS POLICY REMAIN UNCHANGED.

POLICY NUMBER: 435BG02526-04

NAMED INSURED: Lanier Plans, Inc. dba KorKat

INSURANCE COMPANY: The Burlington Insurance Company

PRODUCER: CRC Insurance Services, Inc.

AMENDMENT - CANCELLATION NOTICE

Schedule

Type of Policy:	Commercial General Liability Policy	
Policy Term:	Effective Date 04-15-2024	Expiration Date 04-15-2025
Mail Cancellation Notice to:	Steadfast Management Company, Inc.; STAR Preston Hills, LLC c/o Net Vendor 7644 SW Mohawk St #J Tualatin, OR 97062	
Number of Days notice:	30 days, except 10 days for Non-Payment of premium.	

We shall endeavor to mail written notice of cancellation to the entity(ies) listed in the schedule above giving the number of days shown above in advance of the date of cancellation, but failure to do so shall impose no obligation or liability of any kind upon us, our agents, or our representatives.

ALL OTHER TERMS AND CONDITIONS OF THIS POLICY REMAIN UNCHANGED.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

AMENDMENT – OTHER INSURANCE (PRIMARY AND NON-CONTRIBUTORY COVERAGE)

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

Schedule of Additional Insured(s):
Any person or organization named in an Additional Insured endorsement attached to this policy with whom you have agreed, in a written contract, that such person or organization should be provided primary and non-contributory coverage, but only when such written contract is fully executed prior to an "occurrence" in which coverage is sought under this policy.

A. Paragraph **C.** of this endorsement replaces paragraph **4. Other Insurance** of **Section IV-Commercial General Liability Conditions**, but only with respect to the insurance afforded to the additional insured(s) scheduled above.

B. Paragraph **C.** of this endorsement replaces paragraph **4. Other Insurance** of **Section IV-Products-Completed Operations Liability Conditions**, but only with respect to the insurance afforded to the additional insured(s) scheduled above.

C. Other Insurance

Notwithstanding other valid and collectible insurance available to the insured for a loss we cover under the applicable Coverage Part to which this endorsement is modifying, this insurance is primary and non-contributory.

However, this endorsement:

1. Applies only when you are required by contract, agreement or permit to provide primary and non-contributory coverage for the additional insured, provided such written contract, agreement or permit is fully executed prior to an "occurrence" in which coverage is sought under this policy, and
2. Does not apply to any claim, loss or liability due to the sole negligence of the additional insured.

All other terms and conditions of this Policy remain unchanged.

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COMMERCIAL EXCESS LIABILITY COVERAGE FORM

Various provisions in this policy restrict coverage. Read the entire policy carefully to determine rights, duties and what is and is not covered.

Throughout this policy the words "you" and "your" refer to the Named Insured shown in the Declarations, and any other person or organization qualifying as a Named Insured under this policy. The words "we", "us" and "our" refer to the company providing this insurance. The word "insured" means any person or organization qualifying as such under the "controlling underlying insurance".

Other words and phrases that appear in quotation marks in this Coverage Part have special meaning. Refer to Section **IV** – Definitions. Other words and phrases that are not defined under this Coverage Part but are defined in the "controlling underlying insurance" will have the meaning described in the policy of "controlling underlying insurance".

The insurance provided under this Coverage Part will follow the same provisions, exclusions and limitations that are contained in the applicable "controlling underlying insurance", unless otherwise directed by this insurance. To the extent such provisions differ or conflict, the provisions of this Coverage Part will apply. However, the coverage provided under this Coverage Part will not be broader than that provided by the applicable "controlling underlying insurance".

There may be more than one "controlling underlying insurance" listed in the Declarations and provisions in those policies conflict, and which are not superseded by the provisions of this Coverage Part. In such a case, the provisions, exclusions and limitations of the "controlling underlying insurance" applicable to the particular "event" for which a claim is made or suit is brought will apply.

SECTION I – COVERAGES

1. Insuring Agreement

a. We will pay on behalf of the insured the "ultimate net loss" in excess of the "retained limit" because of "injury or damage" to which insurance provided under this Coverage Part applies.

We will have the right and duty to defend the insured against any suit seeking damages for such "injury or damage" when the applicable "retained limits" of "controlling underlying insurance" have been exhausted solely by the payment of the "retained limit" by the "controlling underlying insurer" in accordance with the provisions of such "controlling underlying insurance". Such payments must be made in satisfaction of judgment or settlements under the "controlling underlying insurance" in the full amount of the "controlling underlying insurance".

When we have no duty to defend, we may exercise the right to defend at our own expense, or to participate in the defense of, the insured at the expense of the "controlling underlying insurer" against any suit seeking damages for "injury or damage".

However, we will have no duty to defend the insured against any suit seeking damages for which insurance under this policy does not apply or when the "retained limit" of the "controlling underlying insurance" has not been exhausted by actual payment of the full amount of the "retained limit" by either the insured or the "controlling underlying insurer(s)".

At our discretion, we may investigate any "event" that may involve this insurance and settle any resultant claim or suit, for which we have the duty to defend.

But:

(1) The amount we will pay for "ultimate net loss" is limited as described in Section **II** – Limits Of Insurance; and

(2) Our right and duty to defend ends when we have used up the applicable limit of insurance in the payment of judgments or settlements under this Coverage Part. However, if the policy of "controlling underlying insurance" specifies that limits are reduced by defense expenses, our right and duty to defend ends when we have used up the applicable limit of insurance in the payment of defense expenses, judgments or settlements under this Coverage Part.

b. This insurance applies to "injury or damage" that is subject to an applicable "retained limit". If any other limit, such as a sublimit, is specified in the "controlling underlying insurance", this insurance does not apply to "injury or damage" arising out of that exposure unless that specific sublimit is specified in the Declarations under the Schedule of "controlling underlying insurance".

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c. If the "controlling underlying insurance" requires, for a particular claim, that the "injury or damage" occur during its policy period in order for that coverage to apply, then this insurance will only apply to that "injury or damage" if it occurs during the policy period of this Coverage Part. If the "controlling underlying insurance" requires that the "event" causing the particular "injury or damage" takes place during its policy period in order for that coverage to apply, then this insurance will apply to the claim only if the "event" causing that "injury or damage" takes place during the policy period of this Coverage Part.

d. Any additional insured under any policy of "controlling underlying insurance" will automatically be an additional insured under this insurance. If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance required by the contract, less any amounts payable by any "controlling underlying insurance".

Additional insured coverage provided by this insurance will not be broader than coverage provided by the "controlling underlying insurance" and will be subject to the Other Insurance condition of this Coverage Part.

2. Exclusions

The following exclusions, and any other exclusions added by endorsement, apply to this Coverage Part. In addition, the exclusions applicable to any "controlling underlying insurance" apply to this insurance unless superseded by the following exclusions, or superseded by any other exclusions added by endorsement to this Coverage Part.

Insurance provided under this Coverage Part does not apply to:

a. Medical Payments

Medical payments coverage or expenses that are provided without regard to fault, whether or not provided by the applicable "controlling underlying insurance".

b. Auto

Any loss, cost or expense payable under or resulting from any of the following auto coverages:

(1) First-party physical damage coverage;

(2) No-fault coverage;

(3) Personal injury protection or auto medical payments coverage; or

(4) Uninsured or underinsured motorists' coverage.

c. Pollution

(1) "Injury or damage" caused by or arising, directly or indirectly, in whole or in part, out of the actual, alleged or threatened discharge, dispersal, disposal, seepage, migration, release or escape of "pollutants" at any time.

(2) Any loss, cost or expense caused by or arising, directly or indirectly, in whole or in part out of any:

(a) Request, demand, order or statutory or regulatory requirement that any insured or others test for, monitor, clean up, remove, contain, treat, detoxify or neutralize, or in any way respond to, or assess the effects of, "pollutants"; or

(b) Claim or suit by or on behalf of a governmental authority for damages because of testing for, monitoring, cleaning up, removing, containing, treating, detoxifying or neutralizing, or in any way responding to, or assessing the effects of, "pollutants".

This exclusion applies whether or not such "pollutants" have any function in your business, operations, premises, site or location or constitutes your product or is a component of your product or products you use.

This exclusion does not apply to the extent that valid "controlling underlying insurance" for the "pollution" liability risks described above exists or would have existed but for the exhaustion of underlying limits for "injury or damage" covered under this Coverage Part.

d. Workers' Compensation And Similar Laws

Any obligation of the insured under a workers' compensation, disability benefits or unemployment compensation law or any similar law.

SECTION II – LIMITS OF INSURANCE

1. The Limits of Insurance shown in the Declarations, and the rules below fix the most we will pay regardless of the number of:

a. Insureds;

b. Claims made or suits brought, or number of vehicles involved;

c. Persons or organizations making claims or bringing suits; or

d. Limits available under any "controlling underlying insurance".

2. The Limits of Insurance of this Coverage Part will apply as follows:

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a. This insurance only applies in excess of the "retained limit".

b. The Aggregate Limit is the most we will pay for the sum of all "ultimate net loss", for all "injury or damage" covered under this Coverage Part.

However, this Aggregate Limit only applies to "injury or damage":

(1) that is subject to an aggregate limit of insurance under the "controlling underlying insurance"; and

(2) to which insurance provided under this Coverage Part applies.

c. Subject to Paragraph **2.b.** above, the Each Occurrence Limit is the most we will pay for the sum of all "ultimate net loss" under this insurance because of all "injury or damage" arising out of any one "event" and to which insurance provided under this Coverage Part applies.

d. If the Limits of Insurance of the "controlling underlying insurance" are reduced by defense expenses by the terms of that policy, any payments for defense expenses we make will reduce our applicable Limits of Insurance in the same manner.

3. If any "controlling underlying insurance" has a policy period that is different from the policy period of this Coverage Part then, for the purposes of this insurance, the "retained limit" will only be reduced or exhausted by payments made for "injury or damage" covered under this insurance.

The Aggregate Limit of this Coverage Part applies separately to each consecutive annual period of this Coverage Part and to any remaining period of this Coverage Part of less than 12 months, starting with the beginning of the policy period shown in the Declarations, unless the policy period is extended after issuance for an additional period of less than 12 months. In that case, the additional period will be deemed part of the last preceding period for purposes of determining the Limits of Insurance.

SECTION III – CONDITIONS

The following conditions apply. In addition, the conditions applicable to any "controlling underlying insurance" are also applicable to the coverage provided under this insurance unless superseded by the following conditions.

1. Appeals

If the "controlling underlying insurer" or insured elects not to appeal a judgment in excess of the amount of the "retained limit", we may do so at our own expense. We will also pay for taxable court costs, pre- and postjudgment interest and disbursements associated with such appeal. In no event will this provision increase our liability beyond the applicable Limits of Insurance described in Section **II** – Limits Of Insurance.

2. Bankruptcy

a. Bankruptcy Of Insured

Bankruptcy, insolvency, rehabilitation or liquidation of, or financial inability to pay by the insured or the insured's estate will not relieve us of our obligations under this Coverage Part provided the "retained limit" has been exhausted solely by the actual payment of the full amount of the "retained limit" by the "controlling underlying insurer(s)", the insured, or the insured's estate. Our obligation under this Coverage Part will only apply to the "ultimate net loss" in excess of the "retained limit".

b. Bankruptcy Of Controlling Underlying Insurer

Bankruptcy, insolvency, rehabilitation or liquidation of, or inability or refusal to pay by the "controlling underlying insurer" will not relieve us of our obligations under this Coverage Part provided the "retained limit" is exhausted as set forth in paragraph **2.c.** below.

c. No Drop Down/No Gap-Filling

Insurance provided under this Coverage Part will not drop down or replace any "controlling underlying insurance":

(1) in the event of bankruptcy, insolvency, rehabilitation or liquidation of, or inability or refusal to pay the "retained limit" by the "controlling underlying insurer(s)", the insured or the insured's estate; or

(2) if the "controlling underlying insurance" is exhausted by payment of losses not covered by insurance provided under this Coverage Part.

In the event of the bankruptcy, insolvency, rehabilitation or liquidation of, or inability or refusal of the "controlling underlying insurer(s)" to pay the "retained limit" or defense costs if outside the limit of liability of the "controlling underlying insurance", the insured will be obligated to pay that amount of the "retained limit" or defense costs not actually paid by the "controlling underlying insurer(s)".

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In no event will our obligations under this Coverage Part be expanded by the loss of or partial payment of the "retained limit" by the "controlling underlying insurer" or its successor or assigns or any state guarantee fund or liquidation bureau.

3. Duties In The Event Of An Event, Claim Or Suit

a. You must see to it that we are notified as soon as practicable of an "event", regardless of the amount, which may result in a claim under this insurance. To the extent possible, notice should include:

(1) How, when and where the "event" took place;

(2) The names and addresses of any injured persons and witnesses; and

(3) The nature and location of any "injury or damage" arising out of the "event".

b. If a claim is made or suit is brought against any insured, you must:

(1) Immediately record the specifics of the claim or suit and the date received; and

(2) Notify us as soon as practicable.

You must see to it that we receive written notice of the claim or suit as soon as practicable.

c. You and any other insured involved must:

(1) Immediately send us copies of any demands, notices, summonses or legal papers received in connection with the claim or suit;

(2) Authorize us to obtain records and other information;

(3) Cooperate with us in the investigation or settlement of the claim or defense against the suit; and

(4) Assist us, upon our request, in the enforcement of any right against any person or organization which may be liable to the insured because of "injury or damage" to which this insurance may also apply.

d. No insured will, except at that insured's own cost, voluntarily make a payment, assume any obligation, or incur any expense, other than for first aid, without our consent.

4. First Named Insured Duties

The first Named Insured is the person or organization first named in the Declarations and is responsible for the payment of all premiums. The first Named Insured will act on behalf of all other Named Insureds for giving and receiving of notice of cancellation or the receipt of any return premium that may become payable.

At our request, the first Named Insured must furnish us, within 60 days, with a complete copy of any "controlling underlying insurance" and any subsequently issued endorsements or policies which may in any way affect the insurance provided under this Coverage Part.

5. Cancellation

a. The first Named Insured shown in the Declarations may cancel this policy by mailing or delivering to us advance written notice of cancellation.

b. We may cancel this policy by mailing or delivering to the first Named Insured written notice of cancellation at least:

(1) 10 days before the effective date of cancellation if we cancel for nonpayment of premium; or

(2) 30 days before the effective date of cancellation if we cancel for any other reason.

c. We will mail or deliver our notice to the first Named Insured's last mailing address known to us.

d. Notice of cancellation will state the effective date of cancellation. The policy period will end on that date.

e. If this policy is cancelled, we will send the first Named Insured any premium refund due. If we cancel, the refund will be pro rata. If the first Named Insured cancels, the refund may be less than pro rata. The cancellation will be effective even if we have not made or offered a refund.

f. If notice is mailed, proof of mailing will be sufficient proof of notice.

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6. Changes

This Coverage Part contains all the agreements between you and us concerning the insurance afforded. The first Named Insured is authorized by all other insureds to make changes in the terms of this Coverage Part with our consent. If we exercise our right to request a complete copy of any "controlling underlying insurance" and any subsequently issued endorsements or policies which may in any way affect the insurance provided under this Coverage Part, we reserve the right to make changes to the terms of this Coverage Part. This Coverage Part's terms can be amended or waived only by endorsement.

7. Maintenance Of/Changes To Controlling Underlying Insurance

Any "controlling underlying insurance", including any renewals or replacements, must be maintained in full effect without reduction of coverage or "retained limits" except for the reduction of aggregate limits in accordance with the provisions of such "controlling underlying insurance" that results from "injury or damage" to which this insurance under this Coverage Part applies.

Such exhaustion or reduction is not a failure to maintain "controlling underlying insurance". Failure to maintain "controlling underlying insurance" will not invalidate insurance provided under this Coverage Part, but insurance provided under this Coverage Part will apply as if the "controlling underlying insurance" were in full effect at the time the "event" took place and is subsequently exhausted solely by the payment of the "retained limit". Such "retained limit" will be equal to the full amount of "controlling underlying insurance" and such payment has been made to the claimant(s) or plaintiff(s).

The first Named Insured must notify us in writing, as soon as practicable, if any "controlling underlying insurance" is cancelled, not renewed, replaced or otherwise terminated, or if the limits or scope of coverage of any "controlling underlying insurance" is changed. These changes will not apply to our policy unless we agree to them in writing.

8. Other Insurance

a. This insurance is excess over, and shall not contribute with any of the other insurance, whether primary, excess, contingent, or issued to an additional insured, or on any other basis. If the insured is named as or qualifies as an additional insured on any other policy, whether primary or excess, such other insurance is primary to this insurance and may not be applied to reduce or exhaust the "retained limit". The "retained limit" may be reduced or exhausted only by actual payment of the "retained limit" by the "controlling underlying insurer," the insured or the insured's estate.

This condition will not apply to insurance specifically written as excess over this Coverage Part.

When this insurance is excess, if no other insurer defends, we may undertake to do so, but we will be entitled to the insured's rights against all those other insurers.

b. When this insurance is excess over other insurance, we will pay only our share of the "ultimate net loss" that exceeds the sum of:

(1) The total amount that all such other insurance would pay for the loss in the absence of the insurance provided under this Coverage Part; and

(2) The total of all deductible and self-insured amounts under all that other insurance.

9. Premium Audit

a. We will compute all premiums for this Coverage Part in accordance with our rules and rates.

b. If this policy is auditable, the premium shown in this Coverage Part as advance premium is a deposit premium only. At the close of each audit period, we will compute the earned premium for that period and send notice to the first Named Insured. The due date for audit premium is the date shown as the due date on the bill. If the sum of the advance and audit premiums paid for the policy period is greater than the earned premium, we will return the excess to the first Named Insured.

c. The first Named Insured must keep records of the information we need for premium computation, and send us copies at such times as we may request.

10. Loss Payable

Liability under this Coverage Part does not apply to a given claim unless and until:

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a. The insured or the "controlling underlying insurer" has become obligated to pay and has actually paid the full amount of the "retained limit";

b. All applicable other insurance has been exhausted; and

c. The obligation of the insured to pay "ultimate net loss" in excess of the "retained limit" has been determined by a final judgment or settlement by the insured with the written consent of us, such consent not to be unreasonably withheld.

11. Legal Action Against Us

No person or organization has a right under this Coverage Part:

a. To join us as a party or otherwise bring us into a suit asking for damages from an insured; or

b. To sue us on this Coverage Part unless all of its terms have been fully complied with.

A person or organization may sue us to recover on an agreed settlement or on a final judgment against an insured; but we will not be liable for damages that are not payable under the terms of this Coverage Part or that are in excess of the applicable limit of insurance. An agreed settlement means a settlement and release of liability signed by us, the insured, "controlling underlying insurer" and the claimant or the claimant's legal representative.

12. Transfer Of Defense

a. Defense Transferred To Us

When the limits of "controlling underlying insurance" have been exhausted, in accordance with the provisions of "controlling underlying insurance", we may elect to have the defense transferred to us. We will cooperate in the transfer of control to us of any outstanding claims or suits seeking damages to which this insurance applies and which would have been covered by the "controlling underlying insurance" had the applicable limit not been exhausted.

b. Defense Transferred By Us

When our limits of insurance have been exhausted our duty to provide a defense will cease.

We will cooperate in the transfer of control of defense to any insurer specifically written as excess over this Coverage Part of any outstanding claims or suits seeking damages to which this insurance applies and which would have been covered by the "controlling underlying insurance" had the applicable limit not been exhausted.

In the event that there is no insurance written as excess over this Coverage Part, we will cooperate in the transfer of control to the insured and its designated representative.

13. When We Do Not Renew

If we decide not to renew this Coverage Part, we will mail or deliver to the first Named Insured shown in the Declarations written notice of the nonrenewal not less than 30 days before the expiration date.

If notice is mailed, proof of mailing will be sufficient proof of notice.

SECTION IV – DEFINITIONS

The definitions applicable to any "controlling underlying insurance" also apply to this insurance. In addition, the following definitions apply.

1. "Controlling underlying insurance" means any policy of insurance or self-insurance listed in the Declarations under the Schedule of "controlling underlying insurance".

2. "Controlling underlying insurer" means any insurer who provides any policy of insurance listed in the Declarations under the Schedule of "controlling underlying insurance".

3. "Event" means an occurrence, offense, accident, act, or other event, to which the applicable "controlling underlying insurance" applies.

4. "Injury or damage" means any injury or damage, covered in the applicable "controlling underlying insurance" arising from an "event".

5. "Pollutants" mean any solid, liquid, gaseous, bacterial, fungal, or thermal substance or material, that is harmful, toxic or hazardous to persons, plants, animals, wildlife or other living organisms or can cause contamination to property, air, land or water, which includes but is not limited to smoke, vapor, soot, fumes, acids, alkalis, chemicals, mineral spirits, solvents, insecticides, pesticides, fungicides, motor fuels, gasoline, diesel fuel, motor oil or any other petroleum based product, brake fluid, transmission fluid, antifreeze, lead paint, or other lead containing substances, carbon monoxide fumes or other exhaust gases, welding fumes, paint fumes, adhesive or glue fumes, asbestos, silica, human or animal sewage and waste.

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Waste includes but is not limited to materials to be recycled, reconditioned or reclaimed. A pollutant also includes any substance or material listed, identified or described in any municipal, state or federal environmental statute or regulation that applies to the production, shipping, handling, storage, use, processing, recycling or disposal of such substance or material.

6. "Retained limit" means the available limits of "controlling underlying insurance" applicable to the claim, excluding any deductible paid or self-insured retention under the "controlling underlying insurance" which must be satisfied in accordance with the provisions of that policy before any obligation to pay an "ultimate net loss". The "retained limit" does not include:

a. any losses excluded by this Coverage Part; or

b. any defense expenses unless the "controlling underlying insurance" specifies that limits are reduced by defense expenses.

7. "Ultimate net loss" means the total sum, of damages covered under this Coverage Part, after reduction for recoveries, or salvages collectible, that the insured becomes legally obligated to pay as damages by reason of:

a. Settlements, judgments, binding arbitration; or

b. Other binding alternate dispute resolution proceeding entered into with our consent.

"Ultimate net loss" includes defense expenses if the "controlling underlying insurance" specifies that limits are reduced by defense expenses.

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City of Tampa
Jane Castor, Mayor

Purchasing Department
Deanna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E. Hanna Ave.
Tampa, Florida 33610
Office: (813) 274-8351
Fax: (813) 274-8355

M E M O R A N D U M

DATE: July 17, 2024

TO: Lisa Grizzle
Parks & Recreation Administrative Manager
Parks and Recreation

FROM: Theresa Samuel, Purchasing Technician

RE: **REQUEST FOR RENEWAL/RE-BID**

The award for **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421** provided by **LAUBS DRAINAGE & FLEXI-PAVE, LLC** will expire on **JANUARY 12, 2025**. This award has a one-year renewal period. Per the terms of the contract, the vendor is entitled to request a **3.0%** escalation using the Consumer Price Index.

We are requesting information from you as to your needs relative to renewing the award for the above referenced goods. Please indicate your preference with an **(X)**, for one of the options listed below.

__x__ 1. You want to renew with the current vendor(s). ***Please attach to the Request for Renewal/Re-bid form an explanation as to why it is in the best interest of the Department to Re-new rather than Re-bid. Include a statement that the current pricing has been reviewed and remains fair and reasonable. The information that you provide will appear in the background section of the agenda request form that will appear before City Council. Please submit the MBD-30 payment form (if applicable) to this renewal. The MBD-30 form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the evaluation period.***

a.__x__ Please complete the attached **Vendor Performance Evaluation** form.

b._____ Please complete the attached **MBD-30 Sub-Contractor Payment** form **(if applicable for this renewal).**

	ESTIMATED EXPENDITURE	FUND	COST CENTER	ACCOUNT
FY_____	Controlled by Requisition			
FY_____				

(If funds are to be split between two fiscal years, please indicate the years and amounts)

____ 2. You do not want to renew with this vendor and would like to Re-bid. **Please provide an explanation:**

_____

_____

____ 3.You do not want to renew or re-bid at this time. (Let contract expire).

Please return this document and the requested information to my office by **July 23, 2024,** in order that we may process your request in a timely manner.

Dept. Contact Name (Printed): Danielle Riffenburg **Signature:** _____ **Date:** _____

Please fax to 813-274-8355 or email to theresa.samuel@tampagov.net

VENDOR PERFORMANCE EVALUATION

Name of Vendor Reviewed:	LAUBS DRAINAGE & FLEXI-PAVE, LLC	
Contract Name & Number:	PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421	
Rating Period	**From: 1/13/24**	**To: Present**

	Place an X for your selection	**Excellent**	**Satisfactory**	**Unsatisfactory**
Delivery/Service completed when required:	Delivered/Service as ordered and to spec?		**x**	
	Timeliness of Product/Service		**x**	
	Quality of Product/Service		**x**	
	Delivery of Products/ Complete/ Undamaged?		**x**	

Please Describe Quality of Product or Service: Products have been delivered in a timely manner and continue to be of good quality.

Customer Satisfaction	Communication (Phone, E-Mail, or Fax availability)?		**x**	
	Responsiveness and proper follow up regarding any contractual or performance issues?		**x**	
	Product or Services fulfilled/completed		**x**	

Have you discussed issues with vendor? _____ Yes ___x___ No

Would you like to request a meeting with Purchasing & Vendor? _____Yes ___x___ No

Performance during rating period: No known issues with products or performance.

Customer Service Comments: Customer service is as expected.

Dept. Contact Name (Printed): Danielle Riffenburg **Signature:** Danielle Riffenburg Digitally signed by Danielle Riffenburg Date: 2024.08.29 15:32:33 -04'00'

Rev: 4/20/11

PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

LAUBS DRAINAGE & FLEXI-PAVE, LLC

Parks and Recreation believes it is in the best interest of the City to renew the contract for Bid #31041421 with LAUBS DRAINAGE & FLEXI-PAVE, LLC. Maintaining the current contract will allow for efficient maintenance and repair of existing and new equipment installed under this contract. The current pricing has been reviewed and remains fair and reasonable.

City of Tampa
Jane Castor, Mayor

Purchasing Department
DeAnna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E Hanna Avenue
Tampa, Florida 33610

Office (813) 274-8351
Fax: (813) 274-8355

September 12, 2024

David Laub
Laub's Drainage & Flexi Pave LLC
504 Wideview Ave.
Tarpon Springs, FL 34685
dave@laubslandscape.com

Dear Mr. Laub:

Your firm has an award with the City of Tampa to provide **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421**

This existing award expires on **JANUARY 12, 2025**. Under the provisions of this award, terms and conditions may be renewed if mutually agreeable to both parties for an additional **one-year** period.

If your firm desires to renew the award, please complete and return the following:

- Statement of Intent
- Form MBD10 – "Schedule of All Sub-Contractors/Consultants/Suppliers Solicited"
- Form MBD20 – "Schedule of Sub-Contractors/Consultants/Suppliers to be Utilized"
- Form MBD50 – "Good Faith Effort Compliance Plan (GFECP) Guidelines"
- Form MBD30 – "Sub-Contractors/Consultant/Suppliers Payments"
- Affidavit of Compliance:
    - FS287.138 Compliance with Foreign Countries of Concern
    - FS287.133 Convicted Vendor List (Public Entity Crimes)
    - FS287.135 Prohibition Against Contracting with Scrutinized Companies
    - FS787.06 Prohibition Against Human Trafficking
    - FS448.095 Compliance With E-Verify

If your firm desires to renew the award, please complete and return the above listed documents. The MBD forms should document any subcontractors that are going to be used to provide goods/services for the award's renewal period and/or if any request for payments has been submitted. If payments were not requested or subcontractors were not used, please mark each form accordingly. **All documents must be submitted for the award/contract to be renewed.**

If you do not wish to renew, please indicate so on the attached Statement of Intent.

Sincerely,

Theresa Samuel
Purchasing Technician
(813) 274-8635
theresa.samuel@tampagov.net

STATEMENT OF INTENT

I, David A. Lamb,

being authorized to contract for Lamb's Drainage & Mexi Pave, do hereby express the firm's desire to renew the above referenced agreement upon the same prices, same terms and conditions. I understand that an extension of the agreement requires the City's approval. This statement represents the above firm's binding approval of an extension of this agreement.

By: _____ 9-15-24
Authorized Signature Date

David A. Lamb
Type or Print Name Above

Title: Mng Partner

Comments:

( ) We do not wish to renew this award. The source for non-renewal is:

By: _____ _____
Authorized Signature Date

_____
Type or Print Name Above

Title: _____

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules
City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)
(FORM MBD-10)

Contract No.: 21-P-00417 Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING INSTALLATION

Company Name: Laub's Drainage & Flexi Pave Address: 504 wideview Ave Tarpon Springs

Federal ID: 85-1000805 Phone: 727-939-2116 Fax: _____ Email: steve@laubsllc.com

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.

- [X] **No Firms were contacted or solicited for this contract.**
- [ ] **No Firms were contacted because:** _____
- [ ] **See attached list of additional Firms solicited and all supplemental information (List must comply to this form)**

Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=W/MBE O = Neither / Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N
85-1000805	Laub's Drainage & Flexi Pave 504 wideview Ave Tarpon Springs, FL 34689	M CM	Flexi Pave EPDM Rubber 912, 914, 912-77	E P	

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub-contracting opportunities on this contract.

Signed: _____ Name/Title: David A. Laub Mgr Partner Date: 9-15-24

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

Page 2 of 4 – DMI Solicited/Utilized
Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) Solicited Form
(Form MBD-10)

This form must be submitted with all bids or proposals. **All** subcontractors (regardless of ownership or size) solicited and subcontractors from whom unsolicited quotations were received must be included on this form. The instructions that follow correspond to the headings on the form required to be completed. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Firms were contacted or solicited for this contract.** Checking the box indicates that a pre-determined Subcontract Goal or Participation Plan Requirement was not set by the City resulting in your business not using subcontractors and will self-perform all work. If during the performance of the contract you employ subcontractors, the City must pre-approve subcontractors. Use of the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: Certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors.
- **No Firms were contacted because.** Provide brief explanation why no firms were contacted or solicited.
- **See attached documents.** Check box, if after you have completed the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the form. All DMI data not submitted on the MBD Form-10 must be in the same format and have all requested data from MBD Form-10 included.

The following instructions are for information of any and all subcontractors solicited.

- **"S" = SLBE, "W" = W/MBE.** Enter "S" for firms Certified by the City as Small Local Business Enterprises and/or "W" for firms Certified by the City as either Women/Minority Business Enterprise; **"O" = Non-certified others**.
- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification and payment of the contractor/subcontractor.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials** indicate the trade, service, or materials provided by the subcontractor. NIGP codes aka "National Institute of Governmental Purchasing" are listed at top section of document.
- **Contact Method L=letter, F=fax, E=Email, P=Phone.** Indicate with letter the method(s) of soliciting for bid.
- **Quote or Resp. (response) Rec'd (received) Y/N**. Indicate "Y" Yes if you received a quotation or if you received a response to your solicitation. Indicate "N" No if you received no response to your solicitation from the subcontractor. Must keep records: log, ledger, documentation, etc. that can validate/verify.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Page 3 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.: 21-P-00417 Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING INSTALLATION

Company Name: Lamb's Drainage & Flexi Pave Address: 504 Wilderview Ave Tarpon Springs FL 34689

Federal ID: 85-1000805 Phone: 727-939-2116 Fax: _____ Email: dave@lambsllc.com

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

☐ **See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)**

Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

☒ **No Subcontracting/consulting (of any kind) will be performed on this contract.**

☐ **No Firms are listed to be utilized because:** _____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=W/MBE O =Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %

Total ALL Subcontract / Supplier Utilization $_____

Total SLBE Utilization $ _____

Total W/MBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. _____% Percent W/MBE Utilization of Total Bid/Proposal Amt. _____%

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: _____ Name/Title: David A. Lamb Manager Date: 9-15-24

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive Forms must be included with Bid / Proposal

Page 4 of 4 DMI – Solicited/Utilized

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) to be Utilized Form

(Form MBD-20)

This form must be submitted with all bids or proposals. All subcontractors (regardless of ownership or size) projected to be utilized must be included on this form. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

Contract No. This is the number assigned by the City of Tampa for the bid or proposal.

- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Subcontracting/consulting (of any kind) will be performed on this contract.** Checking box indicates your business will not use subcontractors when no Subcontract Goal or Participation Plan Requirement was set by the City, but will self-perform all work. When subcontractors are utilized during the performance of the contract, the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors, including completion and submitting Form-10 and Form-20.
- **No Firms listed To-Be-Utilized.** Check box; provide brief explanation why no firms were retained when a goal or participation plan requirement was set on the contract. **Note: Mandatory compliance with Good Faith Effort outreach (GFECP) requirements applies (MBD Form-50) and supporting documentation must accompany the bid.**
- **See attached documents.** Check box, if after completing the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the scope/value/percent utilization of subcontractors. Reproduce copies of MBD-20 and attach. All data not submitted on duplicate forms must be in the same format and content as specified in these instructions.

The following instructions are for information of Any and All subcontractors To Be Utilized.

- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **"S" = SLBE, "W" = W/MBE.** Enter "S" for firms Certified by the City as Small Local Business Enterprises and/or "W" for firms Certified by the City as Women/Minority Business Enterprise; **"O" = Non-certified others.**
- **Company Name, Address, Phone & Fax.** Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials (NIGP code if Known)** Indicate the trade, service, or material provided by the subcontractor. Abbreviated list of NIGP is available at http:/www.tampagov.net/mbd "Information Resources".
- **Amount of Quote, Letters of Intent** (required for both SLBEs and W/MBEs).
- **Percent of Work/Contract.** Indicate the percent of the total contract price the subcontract(s) represent. For CCNA only (i.e. Consultant A/E Services) you must indicate subcontracts as percent of total scope/contract.
- **Total Subcontract/Supplier Utilization.** – Provide total dollar amount of all subcontractors/suppliers projected to be used for the contract. (Dollar amounts may be optional in CCNA depending on solicitation format).
- **Total SLBE Utilization.** Provide total dollar amount for all projected SLBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Total W/MBE Utilization.** Provide total dollar amount for all projected W/MBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Percent SLBE Utilization.** Total amount allocated to SLBEs divided by the total bid/proposal amount.
- **Percent W/MBE Utilization.** Total amount allocated to W/MBEs divided by the total bid/proposal amount.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign, and Submit all Forms 10,20, & 50 SHALL render the Bid or Proposal Non-Responsive

Good Faith Effort Compliance Plan (GFECP) Guidelines

for Women/Minority Business Enterprise\Small Local Business Enterprise ParticipationCity of Tampa - Equal Business Opportunity Program

(Form MBD 50 – See detailed instructions on page 3 of 3)

Contract Name PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT Bid Date _____

Bidder/Proposer Landscape Products & Playground

Signature _____ Date 9-15-24

Name David A. Haub Title Mgr Partner

The Compliance Plan with attachments is a true account of Good Faith Efforts (GFE) made to achieve the participation goals as specified for Women/Minority Business Enterprises & Small Local Business Enterprises (W/MBE & SLBE) on the referenced contract:

☐ **W/MBE & SLBE participation Goal is Not Specified for this Solicitation however participation is aspirational and GFECP is required.**

☐ **W/MBE & SLBE participation Goal is Met or Exceeded (refer to Goal-Set Form MBD-90).**

☐ **W/MBE & SLBE participation Goal is Not Fully Achieved (refer to Goal-Set Form MBD-90).**

For each checkbox above Bidders/Proposers shall submit DMI Forms 10 and 20 which accurately report all subcontractors solicited and all subcontractors to-be-utilized. The following list is an overview of the required baseline GFECP action steps for all bids/proposals. Furthermore, it is understood that these GFECP requirements are weighted in the compliance evaluation based on the veracity and demonstrable degree of documentation provided with the bid/proposal:

(Check applicable boxes below - Must enclose supporting documents accordingly with Qualifying Remarks)

(1) Solicited through reasonable and available means the interest of W/MBE & SLBEs that have the capability to perform the work of the contract. The Bidder or Proposer must solicit this interest within enough time to allow the W/MBE & SLBEs to respond. The Bidder or Proposer must take appropriate steps to follow up initial solicitations with interested W/MBE & SLBEs. ☐ **See DMI report forms for subcontractors solicited.** ☐ **See enclosed supplemental data on solicitation efforts.**

☐ **Qualifying Remarks**

(2) Provided interested W/MBE & SLBEs with adequate, specific scope information about the plans, specifications, and requirements of the contract, including addenda, in a timely manner to assist them in responding to the requested scope identified by bidder/proposer for the solicitation. ☐ **See enclosed actual solicitations used.**
☐ **Qualifying Remarks**

(3) Negotiated in good faith with interested W/MBE & SLBEs that have submitted bids (e.g. adjusted quantities or scale). Documentation of negotiation must include the names, addresses, and telephone numbers of W/MBE & SLBEs that were solicited; the date of each such solicitation; a description of the information provided regarding the plans and specifications for the work selected for subcontracting; and evidence as to why agreements could not be reached with W/MBE & SLBEs to perform the work. Additional costs involved in soliciting and using subcontractors is not a sufficient reason for a bidder/proposer's failure to meet goals or achieve participation, as long as such costs are reasonable. Bidders are not required to accept excessive quotes in order to meet the goal.
☐ **DMI Utilized Forms for sub-(contractor/consultant) reflect genuine negotiations** ☐ **This project is an RFQ/RFP in nature and negotiationsare limited to clarifications of scope/percentages, specifications, qualifications and subs fee schedules.**
☐ **See enclosed documentation.**
☐ **Qualifying Remarks**

(4) Not rejecting W/MBE & SLBEs as being unqualified without justification based on a thorough investigation of their capabilities. The W/MBE & SLBEs standing within its industry, membership in specific groups, organizations / associations and political or social affiliations are not legitimate causes for rejecting or not soliciting bids to meet the goals.
☐ **Not applicable.** ☐ **See attached justification for rejection of a subcontractor's bid or proposal.** ☐ **Qualifying Remarks**

(5) Made scope(s) of work available to W/MBE & SLBE subcontractors and suppliers; and, segmented portions of the work or material consistent with the available W/MBE & SLBE subcontractors and suppliers, to facilitate meeting the goal. ☐ **In addition, Sub-Contractors could bid on their own choice of work or trade without restriction to a pre-determined**

portion. □ **See enclosed comments.**□ **Qualifying Remarks**

(6) Made good faith efforts, despite the ability or desire of Bidder/Proposer to perform the sub-tasks of a contract with its own forces/organization. A Bidder/Proposer who desires to self-perform the sub-tasks of a contract must demonstrate good faith efforts if the goal has not been met. □ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self-performed by the prime.** □ **Qualifying Remarks w/Documents**

(7) Segmented the portions of the work to be performed by W/MBEs & SLBEs in order to increase the likelihood that the goals will be met. This includes, where appropriate, breaking out contract work items into economically feasible units (quantities/scale) to facilitate W/MBE & SLBE participation, even when the Bidder/Proposer might otherwise prefer to perform these work items with its own forces. □ **Sub-Contractors could bid on their own choice of work or trade without restriction to a pre- determined portion.**□ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self- performed by the prime.** □ **See enclosed comments.**□ **Qualifying Remarks**

(8) Made efforts to assist interested W/MBEs & SLBEs in obtaining bonding, lines of credit, or insurance as required by the City or contractor.
□ **See enclosed documentation on initiatives undertaken and methods to accomplish.** □ **Qualifying Remarks**

(9) Made efforts to assist interested W/MBEs & SLBEs in obtaining necessary equipment, supplies, materials, or related assistance or services, including participation in an acceptable mentor-protégé program. □ **See enclosed documentation of initiatives and/or agreements.** □ **Qualifying Remarks**

(10) Effectively used the services of the City and other organizations that provide assistance in the recruitment and placement of W/MBEs & SLBEs.
□ **See enclosed documentation of services engaged.** □ **Overview (attached) of tactical actions and resources employed toward recruitment**

Note: Any unsolicited information in support of your Bid/RFP Compliance must accompany your submittal. □ **Identify Information Submitted**

Participation Plan: Guidance for Complying with Good Faith Efforts Outreach (page 3 of 3)

(1) All firms on the W/MBE & SLBE Goal Setting List must be solicited and documentation provided for email, fax,letters, phone calls, and other methods of outreach/communication with the listed firms. The DMI Solicited and DMI-Utilized forms must be completed for all firms solicited and all firms utilized. Other opportunities for subcontracting should be explored to attain participation. May consult Tampa EBO Office and/or researching the on-line Diversity Management Business System Directory for Tampa certified W/MBE & SLBEfirms.

(2) Solicitation of W/MBE & SLBEs, via written or electronic notification, should provide specific information on the services needed, where plans can be reviewed and assistance offered in obtaining these, if required. Solicitations should be sent a minimum of a week (i.e. 5 city business days or more) before the bid/proposal date. Actual copies of the bidder's solicitation containing their scope-specific instructions should be provided.

(3) With any quotes received, a follow-up should be made when needed to confirm detail scope of work. For anyW/MBE & SLBE low quotes rejected, an explanation shall be provided detailing negotiation efforts.

(4) If a low bid W/MBE & SLBE is rejected or deemed unqualified the contractor must provide an explanation and supporting documentation for this decision.

(5) Prime shall break down portions of work into economical feasible opportunities for subcontracting. The W/MBE & SLBE directory may be useful in identifying additional subcontracting opportunities and certified firms not listed in the "W/MBE & SLBE Goal Setting Firms Contact List."

(6) Contractor shall not preclude W/MBE & SLBEs from bidding on any part of work, even if the Contractor may desire to self-perform aspects of the work.

(7) Contractor shall avoid relying solely on subcontracting those scopes of work where W/MBE & SLBE availabilityis not sufficient to attain pre-determined goals; including RFP/RFQ solicitations, all of which require GFECPcompliance to achieve sub-consultant participation.

(8) In its solicitations, the Bidder should offer assistance to W/MBE & SLBEs in obtaining bonding, insurance, et cetera, if required of subcontractors by the City or Prime Contractor.

(9) In its solicitation, the Bidder should offer assistance in obtaining equipment for a specific job to W/MBE & SLBEs, if needed. This includes mobilization where applicable.

(10) Contractor should use the services offered by such agencies as the Small Business Development Center (SBDC) @ University South Fla.; SBDC @ Hillsborough County Entrepreneur Collaborative Center; Hillsborough NAACP Empowerment Center; Hillsborough County Economic Development Department DM/DWBE/SBE Program and Prospera-Hispanic Business Assoc. to name a few for the recruitment and placement of available WMBEs/SLBEs.

Tampa

Page 1 of 2 –DMI Payment
City of Tampa – DMI Sub-(Contractors/Consultants/Suppliers) Payments
(FORM MBD-30)

[ ] Partial [ ] Final
Contract No.: 21-P-00417 WO#,(if any):_____ Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND
Contractor Name:_____ Address:_____
Federal ID:_____ Phone:_____ Fax:_____ Email:_____
GC Pay Period:_____ Payment Request/Invoice Number:_____ City Department:_____

Total Amount Requested for pay period: $_____ Total Contract Amount (including change orders):$_____
Type of Ownership - (F=Female M=Male), BF BM = African Am., HF HM = Hispanic Am., AF AM = Asian Am., NF NM = Native Am., CF CM = Caucasian S = SLBE

Type Trade/Work Activity []Sub []Supplier Federal ID	Company Name Address Phone & Fax	Total Sub Contract Or PO Amount	Amount Paid To Date Amount Pending Previously Reported	Amount To Be Paid For This Period Sub Pay Period Ending Date
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$

(Modifying This Form or Failure to Complete and Sign May Result in Non-Compliance)

Certification: I hereby certify that the above information is a true and accurate account of payments to sub – contractors/consultants on this contract.

Signed:_____ Name/Title:_____ Date:_____

Note: Detailed Instructions for completing this form are on the next page

Page 2 of 2 – DMI Payment

Instructions for completing The DMI Sub-(Contractors/Consultants/ Suppliers) Payment Form (Form MBD-30)

This form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the pay period. If applicable, after payment has been made to the subcontractor, "Waiver and Release of Lien upon Progress Payment", "Affidavit of Contractor in Connection with Final Payment", or an affidavit of payment must be submitted with the amount paid for the pay period. The following will detail what data is required for this form. The instructions that follow correspond to the headings on the form required to be completed. **(Modifying or omitted information from this form my result in non-compliance).**

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **W.O.#** If the report covers a work order number (W.O.#) for the contract, please indicate it in that space.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business.
- **Address.** The physical address of your business.
- **Federal ID.** A number assigned to a business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **Pay Period.** Provide start and finish dates for pay period. (e.g. 05/01/13 – 05/31/13)
- **Payment Request/Invoice Number.** Provide sequence number for payment requests. (ex. Payment one, write 1 in space, payment three, write 3 in space provided.)
- **City Department**. The City of Tampa department to which the contract pertains.
- **Total Amount Requested for pay period.** Provide all dollars you are expecting to receive for the pay period.
- **Total Contract Amount (including change orders).** Provide expected total contract amount. This includes any change orders that may increase or decrease the original contract amount.
- **Signed/Name/Title/Date**. This is your certification that the information provided on the form is accurate.
- **See attached documents.** Check if you have provided any additional documentation relating to the payment data. Located at the bottom middle of the form.
- **Partial Payment.** Check if the payment period is a partial payment, not a final payment. Located at the top right of the form.
- **Final Payment.** Check of this period is the final payment period. Located at the top right of the form.

The following instructions are for information of any and all subcontractors used for the pay period.

- **(Type) of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business or SLBE.
- **Trade/Work Activity.** Indicate the trade, service, or material provided by the subcontractor.
- **SubContractor/SubConsultant/Supplier.** Please indicate status of firm on this contract.
- **Federal ID.** A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **Company Name, Address, Phone & Fax.** Provide company information for verification of payments.
- **Total Subcontract Amount.** Provide total amount of subcontract for subcontractor including change orders.
- **Amount Paid To Date.** Indicate all dollars paid to date for the subcontractor.
- **Amount Pending, Previously Reported.** Indicate any amount previously reported that payments are pending.
- **Amount To Be Paid for this Period.** Provide dollar amount of dollars requested for the pay period.
- **Sub Pay Period Ending Date.** Provide date for which subcontractor invoiced performed work.

Forms must be signed and dated or will be considered incomplete. The company authorized representative must sign and certify the information is true and accurate. Failure to sign this document or return the document unsigned can be cause for determining a company is in non-compliance of Ordinance 2008-89.

If any additional information is required or you have any questions, you may call the Office of Equal Business Opportunity at (813) 274-5522.

AFFIDAVIT OF COMPLIANCE WITH FOREIGN COUNTRIES OF CONCERN PURSUANT TO SECTION 287.138, FLORIDA STATUTES, CONVICTED VENDOR LIST (PUBLIC ENTITY CRIME) PURSUANT TO SECTION 287.133, FLORIDA STATUTES, PROHIBITION AGAINST CONTRACTING WITH SCRUTINIZED COMPANIES PURSUANT TO SECTION 287.135, FLORIDA STATUTES, PROHIBITION AGAINST HUMAN TRAFFICKING PURSUANT TO SECTION 787.06, FLORIDA STATUTES, AND COMPLIANCE WITH E-VERIFY PURSUANT TO SECTION 448.095, FLORIDA STATUTES

The undersigned Affiant, on behalf of the Entity listed below ("Entity"), hereby attests under penalty of perjury as follows:

Public Entity Crimes

1. Affiant understands that a "person" or "affiliate" who has been placed on the "convicted vendor list" following a "conviction" for a "public entity crime" (as those terms are defined in Section 287.133, Florida Statutes) for a period of 36 months following the date of being placed on the convicted vendor list, is ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa. Entities placed on either the "discriminatory vendor list" or "antitrust vendor list" are ineligible to transact business with the City of Tampa.
2. Affiant understands and attests that neither Affiant, nor any person or affiliate of the Entity, nor the Entity have been placed on any of the above referenced vendor lists that would render the Entity ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa.

Scrutinized Companies

3. Affiant understands that pursuant to Section 287.135(2)(a), Florida Statutes, the Entity would be ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa if the Entity is on the "Scrutinized Companies that Boycott Israel List" (created pursuant to Section 215.4725, Florida Statutes) or is engaged in a boycott of Israel. If the value of the contract is one million dollars or more if, at the time of bidding on, submitting a proposal or reply for, or entering into or renewing a contract, the Entity:
    a. Is on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, created pursuant to Section 215.473, Florida Statutes; or
    b. Is engaged in business operations in Cuba or Syria.

4. Affiant attests that neither Affiant nor the Entity are on the Scrutinized Companies that Boycott Israel List, Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, nor are we engaged in a boycott of Israel, and understand that any resulting contract may be terminated for a falsification of this Affidavit.

E-Verify

5. Affiant understands and attests that pursuant to Section 448.095(5), Florida Statutes, the Entity must comply with Florida's E-Verify law to enter into a contract with the City of Tampa.
6. The undersigned Entity is registered with and uses the United States Department of Homeland Security's E-Verify system to verify the work authorization status of all new employees.
7. No public employer has terminated a contract with the Entity pursuant to Section 448.095(5), Florida Statutes, within the year immediately preceding the date of contracting or submitting a bid, proposal or replay to contract with the City of Tampa.
8. Entity is currently in compliance and will remain in compliance, for the duration of any contract with

the City of Tampa, with all requirements of Section 448.095(5), Florida Statutes.

9. Affiant understands and attests that, if there is a good faith belief that the Entity has knowingly violated Section 448.09(1), Florida Statutes, there is an obligation on the part of the City of Tampa to terminate a contract pursuant to Section 448.095(5), Florida Statutes.
10. Affiant understands and attests that, if there is a good faith belief that one of Entity's subcontractor(s) has knowingly violated the Section 448.09(1), Florida Statutes, but the Entity has otherwise complied with its obligations thereunder, then the Entity will be required to immediately terminate the contract with the subcontractor in order to continue providing services to the City of Tampa.

Anti-Human Trafficking

11. Affiant hereby understands and attests that the undersigned Entity does not use coercion of labor or services as those terms are defined in section 787.06(13), Florida Statutes.

Compliance with Foreign Countries of Concern

12. Affiant, on behalf of the Entity attest to the following:
    a. Entity is not owned by the government of a foreign country of concern as defined in Section 287.138, Florida Statutes. (Source: § 287.138(2)(a), Florida Statutes.)

    b. The government of a foreign country of concern does not have a controlling interest in Entity. (Source: § 287.138(2)(b), Florida Statutes.)

    c. Entity is not organized under the laws of, and does not have a principal place of business in a foreign country of concern. (Source: § 287.138(2)(c), Florida Statutes.)

The undersigned is authorized to execute this Affidavit on behalf of Entity.

The undersigned further sayeth naught.

Date: 9-16-24

(Affiant) Signed: _____

Entity: Lamb's Produce & Nursery

Name: David A. Lamb

Title: My Partner

STATE OF FLORIDA
COUNTY OF PINELLAS

SWORN to (or affirmed) and subscribed before me, by means of ☒ physical presence or ☐ online notarization, this 16TH day of SEPTEMBER, 2024 by KRISTOPH KERR, as DAVID LAMB, who is personally known to me or who has produced DRIVERS LICENSE as identification.

[AFFIX NOTARY SEAL/STAMP]

KRISTOPH KERR
Notary Public - State of Florida
Commission # HH 526638
My Comm. Expires May 13, 2028

_____
Signature of Notary
Name: KRISTOPH KERR
(Print or Type Name)
Notary Public: State of Florida
My Commission Expires 5/13/28

#VDT8QQYV0D2EO7v1

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 03/06/24

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	CONTACT NAME: Plymouth Insurance Agency
Plymouth Insurance Agency 2739 US Hwy 19 North Holiday, FL 34691	PHONE (A/C, No, Ext): 727-682-4040 FAX (A/C, No): 877-491-7980 E-MAIL ADDRESS: CERTS@PLYMOUTHINSURANCEAGENCY.COM
	INSURER(S) AFFORDING COVERAGE — NAIC #
	INSURER A: WESTERN WORLD INSURANCE CO. — 13196
INSURED	INSURER B: Evanston Insurance — 35378
Laub's Drainage & Flexi Pave LLC 504 Wideview Ave. Tarpon Springs, FL 34689	INSURER C:
	INSURER D:
	INSURER E:
	INSURER F:

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO-JECT LOC OTHER:	Y	N	NPP6033685	03/05/24	03/05/25	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$ $ $ $ $ $	1,000,000 100,000 5,000 1,000,000 2,000,000 2,000,000
	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY / SCHEDULED AUTOS HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ $ $ $	
B	UMBRELLA LIAB X OCCUR X EXCESS LIAB CLAIMS-MADE DED RETENTION $	Y	Y	EZXS3149362	03/06/24	03/06/25	EACH OCCURRENCE AGGREGATE	$ $	4,000,000 4,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A					PER STATUTE / OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	$ $ $	

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

City of Tampa, its elected officials, departments, officers, employees, and volunteers together with, as applicable, any associated lender of the City shall be covered as additional insureds on General Liability & Excess Liability as to liability arising out of work or operations performed for the General Liability. Waiver of Subrogation in favor of the additional insureds.

CERTIFICATE HOLDER

CITY OF TAMPA
INSURANCE COMPLIANCE
PO BOX 100085 - ZS
DULUTH, GA 30096

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

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From: Vidia Ali SMTP:Vidia.A@plymouthinsuranceagency.com
To: CityofTampa; Certs CityofTampa@Ebix.com,Certs@plymouthinsuranceagency.com
CC:
Subject: RE: City of Tampa Insurance Request - 851000805
Date: 3/6/2024 12:24:55 PM
Attachment(s):

You don't often get email from vidia.a@plymouthinsuranceagency.com. Learn why this is important

CAUTION: This email originated from outside of the organization! DO NOT click on links or open attachments unless you were expecting the email, recognize the sender, and know the content is safe.

Please see attach renewal COI.



Thank You!

Plymouth Insurance Agency
2739 US Hwy 19 Holiday, FL 34691
Ph: (727) 682-4040 Fax: (877) 491-7980
***GENERAL LIABILITY CERTIFICATE CLICK to PLYMOUTH INSURANCE AGENCY.COM*



From: Customer Service <cityoftampa@ebix.com>
Sent: Tuesday, February 27, 2024 5:33 PM
To: Certs <certs@plymouthinsuranceagency.com>
Subject: City of Tampa Insurance Request - 851000805

The attached notice is being sent to you on behalf of City of Tampa by Ebix RCS. City of Tampa has engaged with Ebix to manage insurance compliance verification on its behalf. You must be properly insured while doing business with City of Tampa and comply with insurance requirements.

As of the date of this notice we have not received proper evidence of insurance coverage. Please review the attached notice as it includes the information needed for compliance and where to send your certificate of insurance.

Instructions: The attached notice is being sent to you and your agent, if we have their email address on file. Please send certificates of insurance electronically to email address referenced below; **certificates sent through USPS will not be**

accepted/processed.

Agent Instructions: Please review the attached notice as it includes the information needed for compliance. Please send certificates of insurance electronically to email address referenced below; **certificates sent through USPS will not be accepted/processed.**

Please send your certificate of insurance via email to _____ if you have any questions, please contact Ebix by calling (951) 652-8127; thank you for your prompt attention to this matter.

Ebix ,Inc. | One Ebix way | Johns Creek, GA 30097 |Web-

This electronic communication is confidential and protected by legal privileges and work product immunities. If you are not the intended recipient, do not use or disseminate the information contained in this electronic communication. Receipt of this electronic communication by anyone other than the intended recipient is not a waiver of attorney-client or work product privileges. If you have received this electronic communication in error, please notify the sender immediately and permanently delete the original and any copies or printouts thereof.

LAUBLAN-01 MCCOMBSD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/18/2024

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
Insurance Office of America
1855 West State Road 434
Longwood, FL 32750

CONTACT NAME:
PHONE (A/C, No, Ext): (407) 788-3000
FAX (A/C, No): (407) 788-7933
E-MAIL ADDRESS:

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Auto-Owners Insurance Company	18988
INSURER B :	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
Laubs Landscape & Drain Solution Inc
504 Wideview Avenue
Tarpon Springs, FL 34689

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY							
	CLAIMS-MADE OCCUR						EACH OCCURRENCE	$
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$
	POLICY PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$
	OTHER:							$
A	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	ANY AUTO	X	X	5079074800	7/11/2024	7/11/2025	BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY X SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	$
	DED RETENTION $							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N						PER STATUTE OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) N / A						E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Certificate Holder is additional insured with respects to Auto Liability when required by a written contract on a primary and non-contributory basis with a waiver of subrogation per the attached coverage forms 58504 1-15, 58583 1-15, 58540 12-19. 30 Day Notice of Cancellation applies with 10 Day notification for non-payment per form# 59495 8-11.

CERTIFICATE HOLDER

City of Tampa
Insurance Compliance
PO Box 100085- ZS
Duluth, GA 30096

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

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From: Dana McCombs SMTP:Dana.Mccombs@ioausa.com
To: CityofTampa CityofTampa@Ebix.com
CC:
Subject: Certificate of Insurance for Laub's Drainage & Flexi Pave llc.
Date: 7/18/2024 1:13:27 PM
Attachment(s):

You don't often get email from dana.mccombs@ioausa.com. Learn why this is important

CAUTION: This email originated from outside of the organization! DO NOT click on links or open attachments unless you were expecting the email, recognize the sender, and know the content is safe.

Good Day:

Attached, please find the certificate of insurance for our client, Laub's Drainage & Flexi Pave LLC.. Feel free to contact me with any questions.

Thank you,

Dana L. McCombs | Senior Account Associate
For Account Managers Pauline Regan and Marlene Gener
Select Business Division - Insurance Office of America
Direct: 407.998.5338 Fax: 407.788.7933
Toll Free: 800.243.6899 ext. 15338

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58504 (1-15)

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

DESIGNATED INSURED FOR COVERED AUTOS LIABILITY COVERAGE - BLANKET COVERAGE

This endorsement modifies insurance provided under the following:

COMMERCIAL AUTO POLICY

SECTION II - COVERED AUTOS LIABILITY COVERAGE is amended. The following provision is added. Any person or organization is an **insured** for Covered Autos Liability Coverage, but only to the extent that person or organization qualifies as an **insured** under **SECTION II - COVERED AUTOS LIABILITY COVERAGE, A. COVERAGE, 1. Who Is An Insured.**

All other policy terms and conditions apply.

58583 (1-15)

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WAIVER OF OUR RIGHT TO RECOVER PAYMENTS (WAIVER OF SUBROGATION) - BLANKET

This endorsement modifies insurance provided under the following:

COMMERCIAL AUTO POLICY

SECTION V CONDITIONS, A. LOSS CONDITIONS is amended. **5. Our Right to Recover Payments** is deleted and replaced by the following condition.

5. Our Right to Recover Payments

If **we** make a payment under this policy and the person to or for whom payment is made has a right to recover damages from another, **we** will be entitled to that right. That person shall do everything necessary to transfer that right to **us** and do nothing to prejudice it.

However, **we** waive **our** right to recover payments made for **bodily injury** or **property damage**:

a. Covered by the policy; and

b. Arising out of the operation of **autos** covered by the policy, in accordance with the terms and conditions of a written contract between **you** and such person or entity

only if such rights have been waived by the written contract prior to the **accident** or **loss** which caused the **bodily injury** or **property damage**.

All other policy terms and conditions apply.

58524 (1-15)

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

AMENDMENT OF DEFINITIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL AUTO POLICY

SECTION VI - DEFINITIONS is amended.

1. **B.** is deleted and replaced by the following definition.
   B. Auto means:
   1. A land motor vehicle;
   2. A **trailer**; or
   3. Any other land vehicle that is subject to a compulsory or financial responsibility law or other motor vehicle insurance law where it is licensed or principally garaged.

   However, **auto** does not include **mobile equipment**. As it applies to this endorsement only, **mobile equipment** does not include a snowmobile.
2. **U.** is deleted and replaced by the following definition.
   U. Trailer means a vehicle which is designed to be connected to and towed by a power unit. **Trailer** does not include non-motorized farm machinery or farm wagons. A **trailer** is not **equipment or custom furnishings**.

All other policy terms and conditions apply.

58540 (12-19)

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PRIMARY AND NONCONTRIBUTORY - BLANKET COVERAGE

This endorsement modifies insurance provided under the following:

COMMERCIAL AUTO POLICY

SECTION V - CONDITIONS, B. GENERAL CONDITIONS, 2. Other Insurance is amended. The following provision is added as it applies to this endorsement only. When this insurance is primary and there is other insurance for any person or organization, other than a Named Insured, which covers liability for **your** operations, contribution from such other insurance shall not be sought by **us** when:

(1) There is a written agreement between **you** and such person or organization that this insurance shall be primary and without the right of contribution; and
(2) Such written agreement was in force prior to any **bodily injury** or **property damage**.

All other policy terms and conditions apply.

CERTIFICATE OF LIABILITY INSURANCE

Date: 12/10/2024

Producer: Plymouth Insurance Agency
2739 U.S. Highway 19 N.
Holiday, FL 34691
(727) 938-5562

Insured: South East Personnel Leasing, Inc. & Subsidiaries
2739 U.S. Highway 19 N.
Holiday, FL 34691

This Certificate is issued as a matter of information only and confers no rights upon the Certificate Holder. This Certificate does not amend, extend or alter the coverage afforded by the policies below.

Insurers Affording Coverage		NAIC #
Insurer A:	Lion Insurance Company	11075
Insurer B:		
Insurer C:		
Insurer D:		
Insurer E:		

Coverages

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. Aggregate limits shown may have been reduced by paid claims.

INSR LTR	ADDL INSRD	Type of Insurance	Policy Number	Policy Effective Date (MM/DD/YY)	Policy Expiration Date (MM/DD/YY)	Limits	
		GENERAL LIABILITY ☐ Commercial General Liability ☐ Claims Made ☐ Occur ☐ ☐ General aggregate limit applies per: ☐ Policy ☐ Project ☐ LOC				Each Occurrence	$
						Damage to rented premises (EA occurrence)	$
						Med Exp	$
						Personal Adv Injury	$
						General Aggregate	$
						Products - Comp/Op Agg	$
		AUTOMOBILE LIABILITY ☐ Any Auto ☐ All Owned Autos ☐ Scheduled Autos ☐ Hired Autos ☐ Non-Owned Autos ☐				Combined Single Limit (EA Accident)	$
						Bodily Injury (Per Person)	$
						Bodily Injury (Per Accident)	$
						Property Damage (Per Accident)	$
		EXCESS/UMBRELLA LIABILITY ☐ Occur ☐ Claims Made ☐ Deductible				Each Occurrence	
						Aggregate	
A		**Workers Compensation and Employers' Liability** Any proprietor/partner/executive officer/member excluded? **NO** If Yes, describe under special provisions below.	WC 71949	01/01/2025	01/01/2026	X WC Statutory Limits ☐ OTHER	
						E.L. Each Accident	$1,000,000
						E.L. Disease - Ea Employee	$1,000,000
						E.L. Disease - Policy Limits	$1,000,000

Other **Lion Insurance Company is A.M. Best Company rated A (Excellent). AMB # 12616**

Descriptions of Operations/Locations/Vehicles/Exclusions added by Endorsement/Special Provisions: Client ID: 34-65-194

Coverage only applies to active employee(s) of South East Personnel Leasing, Inc. & Subsidiaries that are leased to the following "Client Company":

Laub's Drainage & Flexi Pave LLC

Coverage only applies to injuries incurred by South East Personnel Leasing, Inc. & Subsidiaries active employee(s), while working in: FL.

Coverage does not apply to statutory employee(s) or independent contractor(s) of the Client Company or any other entity.

A list of the active employee(s) leased to the Client Company can be obtained by emailing a request to certificates@lioninsurancecompany.com

Project Name:

WAIVER OF SUBROGATION APPLIES IN FAVOR OF THE CITY OF TAMPA, FLORIDA. ISSUE 09-13-22 (TD)

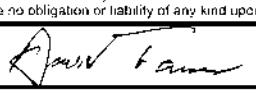
Begin Date: 1/15/2004

CERTIFICATE HOLDER

THE CITY OF TAMPA, FLORIDA
PURCHASING DEPARTMENT
306 E. JACKSON STREET
TAMPA, FL 33602

CANCELLATION

Should any of the above described policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives.



From: customerservice@certsonline.com
From:
From: customerservice@certsonline.com
Subject: Upload Via Web
12-11-2024Attachment(s):Laubs_Drainage___Flexi_Pave__LLC_WC_12.11.24.pdf

 <hr><style type='text/css'>
  body { margin-left: 2 ; margin-right: 5 ; }
  h1 { margin-left: -1 ;margin-right:-1 ;}
  h2,h3,h4,h5,h6 { margin-left: -1 ;margin-right:-1 ; }
  table {width:500;}
</style>Client Name: City of Tampa;Vendor Number: 851000805;Vendor Name: Laubs Landscape, Drainage & Flexi Pave;Document Uploaded By: Penny Hammock;Date Uploaded: 12/11/2024 5:44:40 AM ;Comment: N/A

(Ed. 4-84)

WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

This agreement shall not operate directly or indirectly to benefit anyone not named in the Schedule.

Schedule

THE CITY OF TAMPA, FLORIDA

PURCHASING DEPARTMENT

306 E. JACKSON STREET

TAMPA, FL 33602

Endorsement

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Insured: South East Personnel Leasing, Inc.
Insurance Company: Lion Insurance Co.
Policy #: WC 71949
Effective: 01/01/2025 - 01/01/2026
Client: Laub's Drainage & Flexi Pave LLC

Countersigned by: _____

WC 00 03 13
(Ed. 4-84)

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City of Tampa
Jane Castor, Mayor

Purchasing Department
Deanna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E. Hanna Ave.
Tampa, Florida 33610
Office: (813) 274-8351
Fax: (813) 274-8355

M E M O R A N D U M

DATE: July 17, 2024

TO: Lisa Grizzle
Parks & Recreation Administrative Manager
Parks and Recreation

FROM: Theresa Samuel, Purchasing Technician

RE: **REQUEST FOR RENEWAL/RE-BID**

The award for **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421** provided by **PLAYMORE WEST, INC.** will expire on **JANUARY 12, 2025**. This award has a one-year renewal period. Per the terms of the contract, the vendor is entitled to request a **3.0%** escalation using the Consumer Price Index.

We are requesting information from you as to your needs relative to renewing the award for the above referenced goods. Please indicate your preference with an **(X)**, for one of the options listed below.

__x__ 1. You want to renew with the current vendor(s). ***Please attach to the Request for Renewal/Re-bid form an explanation as to why it is in the best interest of the Department to Re-new rather than Re-bid. Include a statement that the current pricing has been reviewed and remains fair and reasonable. The information that you provide will appear in the background section of the agenda request form that will appear before City Council. Please submit the MBD-30 payment form (if applicable) to this renewal. The MBD-30 form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the evaluation period.***

a.__x___ Please complete the attached **Vendor Performance Evaluation** form.

b._____ Please complete the attached **MBD-30 Sub-Contractor Payment** form **(if applicable for this renewal).**

	ESTIMATED EXPENDITURE	FUND	COST CENTER	ACCOUNT
FY_____	Controlled by Requisition			
FY_____				

(If funds are to be split between two fiscal years, please indicate the years and amounts)

____ 2. You do not want to renew with this vendor and would like to Re-bid. **Please provide an explanation:**

_____

_____

____ 3.You do not want to renew or re-bid at this time. (Let contract expire).

Please return this document and the requested information to my office by **July 23, 2024,** in order that we may process your request in a timely manner.

Dept. Contact Name (Printed): Danielle Riffenburg **Signature:** _____ **Date:** _____

Please fax to 813-274-8355 or email to theresa.samuel@tampagov.net

VENDOR PERFORMANCE EVALUATION

Name of Vendor Reviewed:	PLAYMORE WEST, INC.	
Contract Name & Number:	PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421	
Rating Period	**From: 1/13/24**	**To: Present**

	Place an X for your selection	**Excellent**	**Satisfactory**	**Unsatisfactory**
Delivery/Service completed when required:	Delivered/Service as ordered and to spec?		**x**	
	Timeliness of Product/Service		**x**	
	Quality of Product/Service		**x**	
	Delivery of Products/ Complete/ Undamaged?		**x**	

Please Describe Quality of Product or Service: Products delivered are as expected.

Customer Satisfaction	Communication (Phone, E-Mail, or Fax availability)?		**x**	
	Responsiveness and proper follow up regarding any contractual or performance issues?		**x**	
	Product or Services fulfilled/completed		**x**	

Have you discussed issues with vendor? _____ Yes __x__ No

Would you like to request a meeting with Purchasing & Vendor? _____Yes ___x___ No

Performance during rating period: Vendor is responsive and provides quality products.

Customer Service Comments: Customer service is as expected.

Dept. Contact Name (Printed): Danielle Riffenburg **Signature:** Danielle Riffenburg Digitally signed by Danielle Riffenburg Date: 2024.08.29 15:35:37 -04'00'

Rev: 4/20/11

PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

PLAYMORE WEST, INC.

Parks and Recreation believes it is in the best interest of the City to renew the contract for Bid #31041421 with PLAYMORE WEST, INC. Maintaining the current contract will allow for efficient maintenance and repair of existing and new equipment installed under this contract. The current pricing has been reviewed and remains fair and reasonable.

City of Tampa
Jane Castor, Mayor

Purchasing Department
DeAnna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E Hanna Avenue
Tampa, Florida 33610

Office (813) 274-8351
Fax: (813) 274-8355

September 13, 2024

Luke Russell
Playmore West, Inc.
10271 Deer Run Farms Rd., Suite 1
Ft. Myers, FL 33966
info@playmoreonline.com

Dear Mr. Russell:

Your firm has an award with the City of Tampa to provide **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421**

This existing award expires on **JANUARY 12, 2025**. Under the provisions of this award, terms and conditions may be renewed if mutually agreeable to both parties for an additional **one-year** period.

If your firm desires to renew the award, please complete and return the following:

- Statement of Intent
- Form MBD10 – "Schedule of All Sub-Contractors/Consultants/Suppliers Solicited"
- Form MBD20 – "Schedule of Sub-Contractors/Consultants/Suppliers to be Utilized"
- Form MBD50 – "Good Faith Effort Compliance Plan (GFECP) Guidelines"
- Form MBD30 – "Sub-Contractors/Consultant/Suppliers Payments"
- Affidavit of Compliance:
    - FS287.138 Compliance with Foreign Countries of Concern
    - FS287.133 Convicted Vendor List (Public Entity Crimes)
    - FS287.135 Prohibition Against Contracting with Scrutinized Companies
    - FS787.06 Prohibition Against Human Trafficking
    - FS448.095 Compliance With E-Verify

If your firm desires to renew the award, please complete and return the above listed documents. The MBD forms should document any subcontractors that are going to be used to provide goods/services for the award's renewal period and/or if any request for payments has been submitted. If payments were not requested or subcontractors were not used, please mark each form accordingly. **All documents must be submitted for the award/contract to be renewed.**

If you do not wish to renew, please indicate so on the attached Statement of Intent.

Sincerely,

Theresa Samuel
Purchasing Technician
(813) 274-8635
theresa.samuel@tampagov.net

STATEMENT OF INTENT

I, LUKE RUSSELL,

being authorized to contract for PLAYMORE WEST, INC, do hereby express the firm's desire to renew the above referenced agreement upon the same prices, same terms and conditions. I understand that an extension of the agreement requires the City's approval. This statement represents the above firm's binding approval of an extension of this agreement.

By: _____ 9-17-24
Authorized Signature Date

LUKE RUSSELL
Type or Print Name Above

Title: VICE PRESIDENT

Comments:

( ) We do not wish to renew this award. The source for non-renewal is:

By: _____
Authorized Signature Date

Type or Print Name Above

Title: _____

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-10)

Contract No.: 21-P-00417 Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES) BID #31041421

Company Name: PLAYMORE WEST, INC Address: 10271 DEER RUN FARMS 120, SUITE 1 FT. MYERS, FL

Federal ID: 65-0984408 Phone: 888 886-3757 Fax: 239-791-2401 Email: INFO@playmorewest.com, 33966

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.

- [x] **No Firms were contacted or solicited for this contract.**
- [ ] **No Firms were contacted because:** _____
- [ ] **See attached list of additional Firms solicited and all supplemental information (List must comply to this form)**

Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=W/MBE O = Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub-contracting opportunities on this contract.

Signed: _____ Name/Title: LUKE RUSSELL VP Date: 9-17-24

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

Page 2 of 4 – DMI Solicited/Utilized

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) Solicited Form (Form MBD-10)

This form must be submitted with all bids or proposals. **All** subcontractors (regardless of ownership or size) solicited and subcontractors from whom unsolicited quotations were received must be included on this form. The instructions that follow correspond to the headings on the form required to be completed. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Firms were contacted or solicited for this contract.** Checking the box indicates that a pre-determined Subcontract Goal or Participation Plan Requirement was not set by the City resulting in your business not using subcontractors and will self-perform all work. If during the performance of the contract you employ subcontractors, the City must pre-approve subcontractors. Use of the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: Certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors.
- **No Firms were contacted because.** Provide brief explanation why no firms were contacted or solicited.
- **See attached documents.** Check box, if after you have completed the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the form. All DMI data not submitted on the MBD Form-10 must be in the same format and have all requested data from MBD Form-10 included.

The following instructions are for information of any and all subcontractors solicited.

- **"S" = SLBE, "W" = W/MBE.** Enter "**S**" for firms Certified by the City as Small Local Business Enterprises and/or "**W**" for firms Certified by the City as either Women/Minority Business Enterprise; **"O" = Non-certified others**.
- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification and payment of the contractor/subcontractor.
- **Company Name, Address, Phone & Fax.** Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials** indicate the trade, service, or materials provided by the subcontractor. NIGP codes aka "National Institute of Governmental Purchasing" are listed at top section of document.
- **Contact Method L=letter, F=fax, E=Email, P=Phone.** Indicate with letter the method(s) of soliciting for bid.
- **Quote or Resp. (response) Rec'd (received) Y/N**. Indicate "Y" Yes if you received a quotation or if you received a response to your solicitation. Indicate "N" No if you received no response to your solicitation from the subcontractor. Must keep records: log, ledger, documentation, etc. that can validate/verify.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Page 3 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.: 21-P-00417 Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), RID #31041421

Company Name: PLAYMORE WEST, INC Address: 10271 DEER RUN FARMS RD. SUITE 1 FT. MYERS, FL 33966

Federal ID: 65-0984408 Phone: 239-791-2100 Fax: 239-791-2401 Email: info@playmorewest.com

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

☐ **See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)**

Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

☑ **No Subcontracting/consulting (of any kind) will be performed on this contract.**

☐ **No Firms are listed to be utilized because:** _____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=W/MBE O =Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %

Total ALL Subcontract / Supplier Utilization $ _____

Total SLBE Utilization $ _____

Total W/MBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. _____**% Percent W/MBE Utilization of Total Bid/Proposal Amt.** _____**%**

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: [signature] Name/Title: LUKE RUSSELL Date: 9-17-24

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive Forms must be included with Bid / Proposal

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) to be Utilized Form (Form MBD-20)

This form must be submitted with all bids or proposals. All subcontractors (regardless of ownership or size) projected to be utilized must be included on this form. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

Contract No. This is the number assigned by the City of Tampa for the bid or proposal.

- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Subcontracting/consulting (of any kind) will be performed on this contract.** Checking box indicates your business will not use subcontractors when no Subcontract Goal or Participation Plan Requirement was set by the City, but will self-perform all work. When subcontractors are utilized during the performance of the contract, the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors, including completion and submitting Form-10 and Form-20.
- **No Firms listed To-Be-Utilized.** Check box; provide brief explanation why no firms were retained when a goal or participation plan requirement was set on the contract. **Note: Mandatory compliance with Good Faith Effort outreach (GFECP) requirements applies (MBD Form-50) and supporting documentation must accompany the bid.**
- **See attached documents.** Check box, if after completing the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the scope/value/percent utilization of subcontractors. Reproduce copies of MBD-20 and attach. All data not submitted on duplicate forms must be in the same format and content as specified in these instructions.

The following instructions are for information of Any and All subcontractors To Be Utilized.

- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **"S" = SLBE, "W" = W/MBE.** Enter "**S**" for firms Certified by the City as Small Local Business Enterprises and/or "**W**" for firms Certified by the City as Women/Minority Business Enterprise; **"O" = Non-certified others.**
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials (NIGP code if Known)** Indicate the trade, service, or material provided by the subcontractor. Abbreviated list of NIGP is available at http:/www.tampagov.net/mbd "Information Resources".
- **Amount of Quote, Letters of Intent** (required for both SLBEs and W/MBEs).
- **Percent of Work/Contract.** Indicate the percent of the total contract price the subcontract(s) represent. For CCNA only (i.e. Consultant A/E Services) you must indicate subcontracts as percent of total scope/contract.
- **Total Subcontract/Supplier Utilization.** – Provide total dollar amount of all subcontractors/suppliers projected to be used for the contract. (Dollar amounts may be optional in CCNA depending on solicitation format).
- **Total SLBE Utilization.** Provide total dollar amount for all projected SLBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Total W/MBE Utilization.** Provide total dollar amount for all projected W/MBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Percent SLBE Utilization.** Total amount allocated to SLBEs divided by the total bid/proposal amount.
- **Percent W/MBE Utilization.** Total amount allocated to W/MBEs divided by the total bid/proposal amount.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign, and Submit all Forms 10,20, & 50 SHALL render the Bid or Proposal Non-Responsive

Good Faith Effort Compliance Plan (GFECP) Guidelines

for Women/Minority Business Enterprise\Small Local Business Enterprise ParticipationCity of Tampa - Equal Business Opportunity Program

(Form MBD 50 – See detailed instructions on page 3 of 3)

Contract Name PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING: INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES) RFQ #2024-0401 **Bid Date** _____

Bidder/Proposer PLAYMORE WEST, INC

Signature _____ **Date** 9-17-24

Name LUKE RUSSELL **Title** VICE PRESIDENT

The Compliance Plan with attachments is a true account of Good Faith Efforts (GFE) made to achieve the participation goals as specified for Women/Minority Business Enterprises & Small Local Business Enterprises (W/MBE & SLBE) on the referenced contract:

☑ **W/MBE & SLBE participation Goal is Not Specified for this Solicitation however participation is aspirational and GFECP is required.**

☐ **W/MBE & SLBE participation Goal is Met or Exceeded (refer to Goal-Set Form MBD-90).**

☐ **W/MBE & SLBE participation Goal is Not Fully Achieved (refer to Goal-Set Form MBD-90).**

For each checkbox above Bidders/Proposers shall submit DMI Forms 10 and 20 which accurately report all subcontractors solicited and all subcontractors to-be-utilized. The following list is an overview of the required baseline GFECP action steps for all bids/proposals. Furthermore, it is understood that these GFECP requirements are weighted in the compliance evaluation based on the veracity and demonstrable degree of documentation provided with the bid/proposal:

(Check applicable boxes below - Must enclose supporting documents accordingly with Qualifying Remarks)

(1) Solicited through reasonable and available means the interest of W/MBE & SLBEs that have the capability to perform the work of the contract. The Bidder or Proposer must solicit this interest within enough time to allow the W/MBE & SLBEs to respond. The Bidder or Proposer must take appropriate steps to follow up initial solicitations with interested W/MBE & SLBEs. ☐ **See DMI report forms for subcontractors solicited.** ☐ **See enclosed supplemental data on solicitation efforts.**

☐ **Qualifying Remarks**

(2) Provided interested W/MBE & SLBEs with adequate, specific scope information about the plans, specifications, and requirements of the contract, including addenda, in a timely manner to assist them in responding to the requested scope identified by bidder/proposer for the solicitation. ☐ **See enclosed actual solicitations used.**
☐ **Qualifying Remarks**

(3) Negotiated in good faith with interested W/MBE & SLBEs that have submitted bids (e.g. adjusted quantities or scale). Documentation of negotiation must include the names, addresses, and telephone numbers of W/MBE & SLBEs that were solicited; the date of each such solicitation; a description of the information provided regarding the plans and specifications for the work selected for subcontracting; and evidence as to why agreements could not be reached with W/MBE & SLBEs to perform the work. Additional costs involved in soliciting and using subcontractors is not a sufficient reason for a bidder/proposer's failure to meet goals or achieve participation, as long as such costs are reasonable. Bidders are not required to accept excessive quotes in order to meet the goal.
☐ **DMI Utilized Forms for sub-(contractor/consultant) reflect genuine negotiations** ☐ **This project is an RFQ/RFP in nature and negotiationsare limited to clarifications of scope/percentages, specifications, qualifications and subs fee schedules.**
☐ **See enclosed documentation.**
☐ **Qualifying Remarks**

(4) Not rejecting W/MBE & SLBEs as being unqualified without justification based on a thorough investigation of their capabilities. The W/MBE & SLBEs standing within its industry, membership in specific groups, organizations / associations and political or social affiliations are not legitimate causes for rejecting or not soliciting bids to meet the goals.
☐ **Not applicable.** ☐ **See attached justification for rejection of a subcontractor's bid or proposal.** ☐ **Qualifying Remarks**

(5) Made scope(s) of work available to W/MBE & SLBE subcontractors and suppliers; and, segmented portions of the work or material consistent with the available W/MBE & SLBE subcontractors and suppliers, to facilitate meeting the goal. ☐ **In addition, Sub-Contractors could bid on their own choice of work or trade without restriction to a pre-determined**

portion. ◻ See enclosed comments.◻ Qualifying Remarks

(6) Made good faith efforts, despite the ability or desire of Bidder/Proposer to perform the sub-tasks of a contract with its own forces/organization. A Bidder/Proposer who desires to self-perform the sub-tasks of a contract must demonstrate good faith efforts if the goal has not been met. ◻ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self-performed by the prime. ◻ Qualifying Remarks w/Documents**

(7) Segmented the portions of the work to be performed by W/MBEs & SLBEs in order to increase the likelihood that the goals will be met. This includes, where appropriate, breaking out contract work items into economically feasible units (quantities/scale) to facilitate W/MBE & SLBE participation, even when the Bidder/Proposer might otherwise prefer to perform these work items with its own forces. ◻ **Sub-Contractors could bid on their own choice of work or trade without restriction to a pre- determined portion.◻ Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self- performed by the prime. ◻ See enclosed comments.◻ Qualifying Remarks**

(8) Made efforts to assist interested W/MBEs & SLBEs in obtaining bonding, lines of credit, or insurance as required by the City or contractor.
◻ **See enclosed documentation on initiatives undertaken and methods to accomplish. ◻ Qualifying Remarks**

(9) Made efforts to assist interested W/MBEs & SLBEs in obtaining necessary equipment, supplies, materials, or related assistance or services, including participation in an acceptable mentor-protégé program. ◻ **See enclosed documentation of initiatives and/or agreements. ◻ Qualifying Remarks**

(10) Effectively used the services of the City and other organizations that provide assistance in the recruitment and placement of W/MBEs & SLBEs.
◻ **See enclosed documentation of services engaged. ◻ Overview (attached) of tactical actions and resources employed toward recruitment**

Note: Any unsolicited information in support of your Bid/RFP Compliance must accompany your submittal. ◻ **Identify Information Submitted**

Participation Plan: Guidance for Complying with Good Faith Efforts Outreach (page 3 of 3)

(1) All firms on the W/MBE & SLBE Goal Setting List must be solicited and documentation provided for email, fax,letters, phone calls, and other methods of outreach/communication with the listed firms. The DMI Solicited and DMI-Utilized forms must be completed for all firms solicited and all firms utilized. Other opportunities for subcontracting should be explored to attain participation. May consult Tampa EBO Office and/or researching the on-line Diversity Management Business System Directory for Tampa certified W/MBE & SLBEfirms.

(2) Solicitation of W/MBE & SLBEs, via written or electronic notification, should provide specific information on the services needed, where plans can be reviewed and assistance offered in obtaining these, if required. Solicitations should be sent a minimum of a week (i.e. 5 city business days or more) before the bid/proposal date. Actual copies of the bidder's solicitation containing their scope-specific instructions should be provided.

(3) With any quotes received, a follow-up should be made when needed to confirm detail scope of work. For anyW/MBE & SLBE low quotes rejected, an explanation shall be provided detailing negotiation efforts.

(4) If a low bid W/MBE & SLBE is rejected or deemed unqualified the contractor must provide an explanation and supporting documentation for this decision.

(5) Prime shall break down portions of work into economical feasible opportunities for subcontracting. The W/MBE & SLBE directory may be useful in identifying additional subcontracting opportunities and certified firms not listed in the "W/MBE & SLBE Goal Setting Firms Contact List."

(6) Contractor shall not preclude W/MBE & SLBEs from bidding on any part of work, even if the Contractor may desire to self-perform aspects of the work.

(7) Contractor shall avoid relying solely on subcontracting those scopes of work where W/MBE & SLBE availabilityis not sufficient to attain pre-determined goals; including RFP/RFQ solicitations, all of which require GFECPcompliance to achieve sub-consultant participation.

(8) In its solicitations, the Bidder should offer assistance to W/MBE & SLBEs in obtaining bonding, insurance, et cetera, if required of subcontractors by the City or Prime Contractor.

(9) In its solicitation, the Bidder should offer assistance in obtaining equipment for a specific job to W/MBE & SLBEs, if needed. This includes mobilization where applicable.

(10) Contractor should use the services offered by such agencies as the Small Business Development Center (SBDC) @ University South Fla.; SBDC @ Hillsborough County Entrepreneur Collaborative Center; Hillsborough NAACP Empowerment Center; Hillsborough County Economic Development Department DM/DWBE/SBE Program and Prospera-Hispanic Business Assoc. to name a few for the recruitment and placement of available WMBEs/SLBEs.

N/A

Page 1 of 2 –DMI Payment
City of Tampa – DMI Sub-(Contractors/Consultants/Suppliers) Payments
(FORM MBD-30)

[ ] Partial [ ] Final

Contract No.: 21-P-00417 WO#,(if any):_____ Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

Contractor Name:_____ Address:_____

Federal ID:_____ Phone:_____ Fax:_____ Email:_____

GC Pay Period:_____ Payment Request/Invoice Number:_____ City Department:_____

Total Amount Requested for pay period: $_____ Total Contract Amount (including change orders):$_____

Type of Ownership - (F=Female M=Male), BF BM = African Am., HF HM = Hispanic Am., AF AM = Asian Am., NF NM = Native Am., CF CM = Caucasian S = SLBE

Type Trade/Work Activity []Sub []Supplier Federal ID	Company Name Address Phone & Fax	Total Sub Contract Or PO Amount	Amount Paid To Date Amount Pending Previously Reported	Amount To Be Paid For This Period Sub Pay Period Ending Date
	NONE		$	$
			$	$
			$	$
			$	$
			$	$
			$	$

(Modifying This Form or Failure to Complete and Sign May Result in Non-Compliance)

Certification: I hereby certify that the above information is a true and accurate account of payments to sub – contractors/consultants on this contract.

Signed:_____ Name/Title: Luke Russell - Vice President Date: 9/24/24

Note: Detailed Instructions for completing this form are on the next page

Tampa

Page 2 of 2 – DMI Payment

Instructions for completing The DMI Sub-(Contractors/Consultants/ Suppliers) Payment Form (Form MBD-30)

This form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the pay period. If applicable, after payment has been made to the subcontractor, "Waiver and Release of Lien upon Progress Payment", "Affidavit of Contractor in Connection with Final Payment", or an affidavit of payment must be submitted with the amount paid for the pay period. The following will detail what data is required for this form. The instructions that follow correspond to the headings on the form required to be completed. **(Modifying or omitted information from this form my result in non-compliance).**

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **W.O.#** If the report covers a work order number (W.O.#) for the contract, please indicate it in that space.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business.
- **Address.** The physical address of your business.
- **Federal ID.** A number assigned to a business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **Pay Period.** Provide start and finish dates for pay period. (e.g. 05/01/13 – 05/31/13)
- **Payment Request/Invoice Number.** Provide sequence number for payment requests. (ex. Payment one, write 1 in space, payment three, write 3 in space provided.)
- **City Department**. The City of Tampa department to which the contract pertains.
- **Total Amount Requested for pay period.** Provide all dollars you are expecting to receive for the pay period.
- **Total Contract Amount (including change orders).** Provide expected total contract amount. This includes any change orders that may increase or decrease the original contract amount.
- **Signed/Name/Title/Date**. This is your certification that the information provided on the form is accurate.
- **See attached documents.** Check if you have provided any additional documentation relating to the payment data. Located at the bottom middle of the form.
- **Partial Payment.** Check if the payment period is a partial payment, not a final payment. Located at the top right of the form.
- **Final Payment.** Check of this period is the final payment period. Located at the top right of the form.

The following instructions are for information of any and all subcontractors used for the pay period.

- **(Type) of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business or SLBE.
- **Trade/Work Activity.** Indicate the trade, service, or material provided by the subcontractor.
- **SubContractor/SubConsultant/Supplier.** Please indicate status of firm on this contract.
- **Federal ID.** A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Total Subcontract Amount.** Provide total amount of subcontract for subcontractor including change orders.
- **Amount Paid To Date.** Indicate all dollars paid to date for the subcontractor.
- **Amount Pending, Previously Reported.** Indicate any amount previously reported that payments are pending.
- **Amount To Be Paid for this Period.** Provide dollar amount of dollars requested for the pay period.
- **Sub Pay Period Ending Date.** Provide date for which subcontractor invoiced performed work.

Forms must be signed and dated or will be considered incomplete. The company authorized representative must sign and certify the information is true and accurate. Failure to sign this document or return the document unsigned can be cause for determining a company is in non-compliance of Ordinance 2008-89.

If any additional information is required or you have any questions, you may call the Office of Equal Business Opportunity at (813) 274-5522.

AFFIDAVIT OF COMPLIANCE WITH FOREIGN COUNTRIES OF CONCERN PURSUANT TO SECTION 287.138, FLORIDA STATUTES, CONVICTED VENDOR LIST (PUBLIC ENTITY CRIME) PURSUANT TO SECTION 287.133, FLORIDA STATUTES, PROHIBITION AGAINST CONTRACTING WITH SCRUTINIZED COMPANIES PURSUANT TO SECTION 287.135, FLORIDA STATUTES, PROHIBITION AGAINST HUMAN TRAFFICKING PURSUANT TO SECTION 787.06, FLORIDA STATUTES, AND COMPLIANCE WITH E-VERIFY PURSUANT TO SECTION 448.095, FLORIDA STATUTES

The undersigned Affiant, on behalf of the Entity listed below ("Entity"), hereby attests under penalty of perjury as follows:

Public Entity Crimes

1. Affiant understands that a "person" or "affiliate" who has been placed on the "convicted vendor list" following a "conviction" for a "public entity crime" (as those terms are defined in Section 287.133, Florida Statutes) for a period of 36 months following the date of being placed on the convicted vendor list, is ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa. Entities placed on either the "discriminatory vendor list" or "antitrust vendor list" are ineligible to transact business with the City of Tampa.
2. Affiant understands and attests that neither Affiant, nor any person or affiliate of the Entity, nor the Entity have been placed on any of the above referenced vendor lists that would render the Entity ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa.

Scrutinized Companies

3. Affiant understands that pursuant to Section 287.135(2)(a), Florida Statutes, the Entity would be ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa if the Entity is on the "Scrutinized Companies that Boycott Israel List" (created pursuant to Section 215.4725, Florida Statutes) or is engaged in a boycott of Israel. If the value of the contract is one million dollars or more if, at the time of bidding on, submitting a proposal or reply for, or entering into or renewing a contract, the Entity:
    a. Is on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, created pursuant to Section 215.473, Florida Statutes; or
    b. Is engaged in business operations in Cuba or Syria.

4. Affiant attests that neither Affiant nor the Entity are on the Scrutinized Companies that Boycott Israel List, Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, nor are we engaged in a boycott of Israel, and understand that any resulting contract may be terminated for a falsification of this Affidavit.

E-Verify

5. Affiant understands and attests that pursuant to Section 448.095(5), Florida Statutes, the Entity must comply with Florida's E-Verify law to enter into a contract with the City of Tampa.
6. The undersigned Entity is registered with and uses the United States Department of Homeland Security's E-Verify system to verify the work authorization status of all new employees.
7. No public employer has terminated a contract with the Entity pursuant to Section 448.095(5), Florida Statutes, within the year immediately preceding the date of contracting or submitting a bid, proposal or replay to contract with the City of Tampa.
8. Entity is currently in compliance and will remain in compliance, for the duration of any contract with

the City of Tampa, with all requirements of Section 448.095(5), Florida Statutes.

9. Affiant understands and attests that, if there is a good faith belief that the Entity has knowingly violated Section 448.09(1), Florida Statutes, there is an obligation on the part of the City of Tampa to terminate a contract pursuant to Section 448.095(5), Florida Statutes.
10. Affiant understands and attests that, if there is a good faith belief that one of Entity's subcontractor(s) has knowingly violated the Section 448.09(1), Florida Statutes, but the Entity has otherwise complied with its obligations thereunder, then the Entity will be required to immediately terminate the contract with the subcontractor in order to continue providing services to the City of Tampa.

Anti-Human Trafficking

11. Affiant hereby understands and attests that the undersigned Entity does not use coercion of labor or services as those terms are defined in section 787.06(13), Florida Statutes.

Compliance with Foreign Countries of Concern

12. Affiant, on behalf of the Entity attest to the following:
    a. Entity is not owned by the government of a foreign country of concern as defined in Section 287.138, Florida Statutes. (Source: § 287.138(2)(a), Florida Statutes.)

    b. The government of a foreign country of concern does not have a controlling interest in Entity. (Source: § 287.138(2)(b), Florida Statutes.)

    c. Entity is not organized under the laws of, and does not have a principal place of business in a foreign country of concern. (Source: § 287.138(2)(c), Florida Statutes.)

The undersigned is authorized to execute this Affidavit on behalf of Entity.

The undersigned further sayeth naught.

Date: 9-17-24

(Affiant) Signed: [signature]

Entity: PLAYMORE WEST, INC

Name: LUKE RUSSELL

Title: VICE PRESIDENT

STATE OF Florida
COUNTY OF Lee

SWORN to (or affirmed) and subscribed before me, by means of ☒ physical presence or ☐ online notarization, this 17 day of September, 2024 by Luke Russell, as Vice President, who is personally known to me or who has produced _____ as identification.

[AFFIX NOTARY SEAL/STAMP]

MELISSA VEGA
Notary Public - State of Florida
Commission # HH 410422
My Comm. Expires Sep 30, 2027
Bonded through National Notary Assn.

Melissa Vega
Signature of Notary

Name: Melissa Vega
(Print or Type Name)

Notary Public: State of Florida
My Commission Expires 9-30-27

#VDT8QQYV0D2EO7v1

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 12/16/2024

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
Cooper Insurance Service, Inc.
PO Box 638
904 N Main Street
Lapel IN 46051

CONTACT NAME:
PHONE (A/C, No, Ext): 765-534-3152
FAX (A/C, No): 765-534-2067
E-MAIL ADDRESS:

INSURED
PLAYWES-01
Playmore West, Inc.
Playmore Recreational Products & Services
10271 Deer Run Farm Rd, Ste 1
Fort Myers FL 33966

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Richmond National Insurance Company	17103
INSURER B : Cincinnati Specialty Un Ins Co	13037
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

COVERAGES **CERTIFICATE NUMBER:** 483586748 **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	X COMMERCIAL GENERAL LIABILITY	Y	Y	CSU0143119	12/14/2024	12/14/2025	EACH OCCURRENCE	$ 1,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
							MED EXP (Any one person)	$ 5,000
							PERSONAL & ADV INJURY	$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 3,000,000
	POLICY X PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$ 3,000,000
	OTHER:							$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
A	UMBRELLA LIAB X OCCUR	Y	Y	RN-2-1278245-01	12/14/2024	12/14/2025	EACH OCCURRENCE	$ 5,000,000
	X EXCESS LIAB CLAIMS-MADE						AGGREGATE	$ 5,000,000
	DED X RETENTION $ 0							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N						PER STATUTE / OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) N / A						E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
RE: Bid #31041421 - City of Tampa. its elected officials, departments, officers, employees, and volunteers together with, as applicable, any associated lender of the City shall be covered as additional insureds on general & excess liability coverages as to liability arising out of work or operations performed by or on behalf of Firm including materials, parts, or equipment furnished in connection with such work or operations. Waiver of Subrogation in favor of the City, its elected officials, departments, officers, employees, and volunteers together with, as applicable, any associated lender of the City, for general liability and excess liability coverages.

CERTIFICATE HOLDER

City of Tampa Insurance Compliance
PO Box 100085 - ZS
Duluth GA 30096
USA

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

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From: Carrie Murkerson SMTP:carriem@playmoreonline.com
To: CityofTampa CityofTampa@Ebix.com
CC:
Subject: RE: City of Tampa Insurance Request - 650984408
Date: 12/18/2024 8:32:51 AM
Attachment(s):

You don't often get email from carriem@playmoreonline.com. Learn why this is important

CAUTION: This email originated from outside of the organization! DO NOT click on links or open attachments unless you were expecting the email, recognize the sender, and know the content is safe.

Attached please find the renewal COI for Playmore.

Kind Regards,

Carrie Murkerson
Accounting Assistant



10271 Deer Run Farms Road, Suite 1
Fort Myers, FL 33966
www.playmoreonline.com
239-722-9970 Cell

From: Melissa Vega <melissav@playmoreonline.com>
Sent: Monday, December 16, 2024 10:45 AM
To: Carrie Murkerson <carriem@playmoreonline.com>
Subject: FW: City of Tampa Insurance Request - 650984408

From: Luke Russell <luker@playmoreonline.com>
Sent: Friday, December 6, 2024 7:53 AM
To: Melissa Vega <melissav@playmoreonline.com>
Subject: FW: City of Tampa Insurance Request - 650984408

Luke Russell
Vice President / Principal

Playmore Recreational Products & Services
10271 Deer Run Farms Rd., Suite 1
Fort Myers, FL 33966
888-886-3757 x 223
239-340-8184 cell
playmoreonline.com
License # CBC 1252224

From: Customer Service <cityoftampa@ebix.com>
Sent: Thursday, December 5, 2024 3:37 PM
To: Luke Russell <luker@playmoreonline.com>
Subject: City of Tampa Insurance Request - 650984408

The attached notice is being sent to you on behalf of City of Tampa by Ebix RCS. City of Tampa has engaged with Ebix to manage insurance compliance verification on its behalf. You must be properly insured while doing business with City of Tampa and comply with insurance requirements.

As of the date of this notice we have not received proper evidence of insurance coverage. Please review the attached notice as it includes the information needed for compliance and where to send your certificate of insurance.

Instructions: The attached notice is being sent to you and your agent, if we have their email address on file. Please send certificates of insurance electronically to email address referenced below; **certificates sent through USPS will not be accepted/processed.**

Agent Instructions: Please review the attached notice as it includes the information needed for compliance. Please send certificates of insurance electronically to email address referenced below; **certificates sent through USPS will not be accepted/processed.**

Please send your certificate of insurance via email to _____ if you have any questions, please contact Ebix by calling (951) 652-8127; thank you for your prompt attention to this matter.

EBIX **Ebix ,Inc. | One Ebix way | Johns Creek, GA 30097 |Web-**

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 07/10/2024

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
Carlock & Associates Insurance, Inc.
2002 Del Prado Boulevard S Ste #200
Cape Coral, FL 33990

CONTACT NAME: KEITH ROSSELL
PHONE (A/C, No, Ext): (239) 549-0221 FAX (A/C, No): (239) 549-6098
E-MAIL ADDRESS: keith@carlockinsurance.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : AUTO-OWNERS INSURANCE COMPANY	18988
INSURER B :	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
PLAYMORE WEST INC DBA PLAYMORE RECREATIONAL PRODUCTS & SERVICES CBC1252224
10271 DEER RUN FARMS ROAD SUITE #1
FORT MYERS, FL 33966-1078

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:1**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	$
	[ ] CLAIMS-MADE [ ] OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$
	[ ] POLICY [ ] PRO-JECT [ ] LOC						PRODUCTS - COMP/OP AGG	$
	[ ] OTHER:							$
A	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	[X] ANY AUTO						BODILY INJURY (Per person)	$
	[ ] OWNED AUTOS ONLY [ ] SCHEDULED AUTOS	x	x	4687381400	07/16/24	07/16/25	BODILY INJURY (Per accident)	$
	[X] HIRED AUTOS ONLY [X] NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	[ ] UMBRELLA LIAB [ ] OCCUR						EACH OCCURRENCE	$
	[ ] EXCESS LIAB [ ] CLAIMS-MADE						AGGREGATE	$
	[ ] DED [ ] RETENTION $							$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N						[X] PER STATUTE [ ] OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? [Y] (Mandatory in NH)	N/A	X	A106-600-557	07/16/24	07/16/25	E.L. EACH ACCIDENT	$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						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)

CITY OF TAMPA, ITS ELECTED OFFICIALS,DEPARTMENTS,OFFICIERS EMPLOYEES AND VOLUNTEERS TOGETHER WITH , AS APPLICABLE ANY ASSOCIATED LENDER OF THE CITY OF TAMPA IS INCLUDED AS ADDITIONAL INSURED ON THE AUTO LIABILITY.
A WAIVER OF SUBROGATION IN FAVOR OF THE CITY OF TAMPA ITS ELECTED OFFICIALS DEPARTMENTS OFFICERS EMPLOYEES AND VOLUNTEERS TOGETHER WITH AS APPLICABLE ANY ASSOCIATED LENDER OF THE CITY OF TAMPA APPLIES TO THE WORKERS COMPENSATION POLICY AND THE AUTO LIABILITY POLICY.

CERTIFICATE HOLDER

CITY OF TAMPA
INSURANCE COMPLIANCE
PO BOX 100085-ZS
DULUTH, GA 30096

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 <DMM>

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ESCALATION COMPUTATION FOR
PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421 – PLAYMORE RECREATIONAL PRODUCTS & SERVICES

This form is used to calculate, document and approve or disapprove a request from the Vendor for escalation/de-escalation of prices based on increases or decreases. The index being used is:

[ ] Consumer Price Index (CPI)
[ ] Producers Price Index (PPI)
[X] Manufacturer Increase Index

Calculation:

1. For a 12-month period:

***Vendor requests price increase based on updated catalog and price lists**

FEBRUARY 2025 — Current (Month/Yr)

Please see attached — Maximum Allowable Escalation

2. For a _____ month period:

Current Month _____ (Month/Yr) _____ (A) Index

First Month _____ (Month/Yr) - _____ (B) Index

(C) = _____ ÷ (B) = _____

= _____ % Maximum Allowable Escalation

Compare maximum allowable escalation with escalation/de-escalation requested from the Vendor.

[x] Escalation/De-escalation Approved.

[ ] Escalation/De-escalation Disapproved.

Note: If the current month is less than the first month, the answer will be a negative number and therefore a de-escalation is in order.

Purchasing Technician: Theresa Samuel Date: 10/30/24

Procurement Manager Signature: Cheryl Aldridge Date: 2/19/25

An award will be made, if at all, within 120 days after opening of the bids.

4.14 COMMUNICATION POLICY. During any solicitation period, including any protest and/or appeal, no contact with City officials or employees, other than with the individuals specifically identified in the solicitation, the Director of Purchasing or the Legal Department is permitted from any proposer/bidder. Such communication shall result in an automatic disqualification for selection in the pending solicitation and any subsequent City solicitations for a period of six (6) months, no matter the outcome of the solicitation or any protest and/or appeal.

4.15 AWARD PERIOD AND RENEWAL. The award period shall be for a three-year period from the effective date of the award, and may, by mutual written agreement, be renewed at the same terms and conditions for an additional one-year period.

4.15.1 SUPPLEMENTAL UNILATERAL RENEWAL PERIODS. The City, through its Director of Purchasing, has the option and reserves the right to unilaterally extend the original contract term or any renewal term for up to three (3) additional thirty (30) day periods, at the same terms and conditions. Notice of the City's intent to renew shall be provided by the City in writing to the Awardee prior to the expiration of the contract, or the renewal period if the contract has been previously renewed.

4.16 NON-APPROPRIATION OF FUNDS. In the event no funds or insufficient funds are appropriated for expenditures under this award, the City will notify the Awardee in writing of such occurrence and the award shall terminate without penalty or expense to the City on the last day of the fiscal year in which sufficient funds have been appropriated.

4.17 PRICE ESCALATION/DE-ESCALATION. The City of Tampa will allow a price escalation provision within this award.

The original bid prices shall be firm and may be revised upon the receipt of updated catalog and price lists. The Awardee(s) shall provide to the City of Tampa with the published manufacturers price lists anytime the manufacturers revise their dated price pages. The City of Tampa will have 30 days upon receipt of the dated price pages to review and make necessary changes.

In no event shall the percentage of mark-up change from the percentage mark-up indicated on the Bid Response Pages.

4.18 PERFORMANCE. The Awardee may be required to furnish evidence in writing that he or she maintains a permanent place of business and has adequate equipment, finances, personnel, and inventory to furnish the items offered satisfactorily and expeditiously and can provide necessary services.

4.19 PROOF OF DISTRIBUTORSHIP. When requested, it shall be the responsibility of the Bidder(s) to furnish with their bid(s) a letter stating that said Bidder is a factory authorized distributor for the Greater Tampa area for the items for which said Bidder has submitted their bid.

4.20 INSPECTION. The City of Tampa reserves the right to inspect the Bidder's place of business and equipment prior to awarding any award to determine the responsibility of said Bidder to perform or provide the requirements of the bid request.

4.21 AWARD CHANGES. No changes, over the award period, shall be permitted unless prior written approval is given by the Director of Purchasing and, where applicable, confirmed by resolution of the City Council of the City of Tampa.

4.22 ASSIGNMENT. To the extent permitted by applicable law, this contract, and all rights or obligations hereunder, is not assignable, in whole or in part, by operation of law, acquisition of assets, merger, consolidation, dissolution or otherwise without the advance written approval of the other party to this contract. Any attempted assignment of this contract by a party without the advance written approval of the other party shall be invalid and unenforceable against the other party. Any approved assignment of this contract by the Awardee will not relieve the Contractor from the performance of its duties, covenants, agreements, obligations, and undertakings under this contract, unless the assignment expressly provides otherwise. No assignment by the Awardee shall be effective unless the assignee confirms in writing to the City that the assignee accepts and shall comply with all of the duties, responsibilities, and

Price List

2024



Berliner

Play equipment for life

Pricelist 2024
Compendium 11

LevelUp

Page	*Item number*	*Name*	*Price in $*	*Remarks*
46	LU.001.001	LevelUp.01.1	54,633	
47	LU.002.002	LevelUp.02.2	91,303	
48	LU.003.001	LevelUp.03.1	147,825	
49	LU.004.004	LevelUp.04.4	165,639	
50	LU.005.002	LevelUp.05.2	280,288	
51–52		Play Panels & Add-on Components for LevelUp	upon request	

Greenville

59	90.292.400.2	Triitopia.02	646,814	*With Stainless Steel Tunnel Slide and Fast Lane Slide*
60	90.292.402	Triitopia.20	294,225	*Incl. PSI Slide*
61	90.292.400.4	Triitopia.04	126,159	*With Stainless Steel Slide*
61	90.292.400.7	Triitopia.07	110,407	*With Stainless Steel Slide*
62	90.292.400.8	Triitopia.08	374,150	*With Stainless Steel Slide*
62	90.292.400.5	Triitopia.05	161,567	*With Stainless Steel Slide*
63	90.292.402.0	Triitopia.21	212,255	*With Fast Lane Slide*
65	90.292.010	Trii Base	14,433	
65		Trii1	28,408	
65		Trii2	27,876	
65		Trii3	30,654	
65		Quii	19,242	
66	90.292.100.1	Trii1.01	30,362	*With Stainless Steel Slide*
66	90.292.200.8	Trii2.08	52,904	*With Stainless Steel Slide*
67	90.292.300.3	Trii3.03	73,948	*With Stainless Steel Slide*
67	90.292.201.400.1	Trii2.14	31,161	
68	90.293.102	Greenville Combi.102	82,807	*With Stainless Steel Slide*
69	90.293.061	Greenville Combi.061	54,650	*With Stainless Steel Slide*
70	90.293.039	Greenville Combi.039	156,948	
70	90.293.362	Greenville Combi.362	125,844	*With Stainless Steel Slide*
71	90.293.207	Greenville Combi.207	235,297	*With Stainless Steel Slide*
72	90.293.155	Greenville Combi.155	76,778	
73	90.293.307	Greenville Combi.307	89,449	*With Fast Lane Slide*
73	90.293.641	Greenville Combi.641	169,436	*With Stainless Steel Slide*
75	90.293.077	Greenville Combi.077	upon request	*With Stainless Steel Slide*
76	90.293.479	Greenville Combi.479	115,802	*With Stainless Steel Slide*
77		Add-on Components for Triis	upon request	

Page	Item number	Name	Price in $	Remarks
79	90.294.001.237	Leaf L	2,150	
79	90.294.001.236	Leaf M	1,815	
79	90.294.001.235	Leaf S	1,642	
82	90.295.002	Tower2	241,510	
82	90.295.007	Tower7	421,825	
83	90.295.003	Tower3	173,596	
83	90.295.005	Tower5	197,286	
84	90.295.001	Tower1	111,200	
84	90.295.006	Tower6	90,311	
85	90.295.004	Tower4	406,615	
87	90.280.004	QuadroBoo	157,455	*without Slide*
87		Peak	17,064	
87		Splash	16,981	
88	90.270.001	Bam.01	85,414	*With Stainless Steel Slide*
88	90.270.000	Bam	58,483	
89	90.280.000	Boo	45,839	
89	90.280.002	Boo.02	61,121	*With Stainless Steel Slide*
90	90.280.000.2	DoubleBoo	84,680	
90	90.280.000.3	TripleBoo	127,917	
91	90.280.014	QuadroBoo.14	171,109	*Price with straight concave Stainless Steel Slide*
92	90.292.001	Peak.01	26,926	
92	90.291.001	Splash.01	29,322	
93	91.200.022	PentaBoo M	96,226	
	91.200.033	PentaBoo L	97,918	
94	90.293.006	Greenville Combi.06	218,069	*Price with Stainless Steel Slide*
95	90.293.002	Greenville Combi.02	113,303	*Price with Stainless Steel Slide*
95	90.293.003	Greenville Combi.03	94,848	
97	90.293.793	Greenville Combi.793	234,839	*With Stainless Steel Slide*
97	90.293.045	Greenville Combi.045	72,472	
98	90.293.700	Greenville Combi.700	288,260	*With Stainless Steel Slide*
99	90.293.024	Greenville Combi.024	124,867	
100	90.293.444	Greenville Combi.444	601,928	*With Stainless Steel Slide*

Woodville

107	90.224.100.2	Woodville Combi.02	89,176	*Price with Stainless Steel Slide*
108	90.224.100.3	Woodville Combi.03	117,084	*Price with 2 × Stainless Steel Slides*
109	90.224.103.3	Woodville Combi.033	89,525	
110	90.224.100.4	Woodville Combi.04	75,236	*Price with Stainless Steel Slide*
111	90.224.100.5	Woodville Combi.05	63,121	*Price with Plastic Tube Slide*
112	90.224.010.1	Shack1.01	39,662	*Price with Stainless Steel Slide*
112	90.224.030.1	Shack3.01	36,497	*Price with Stainless Steel Slide*
113	90.224.020.1	Shack2.01	48,222	*Price with Stainless Steel Slide*
113	90.224.040.1	Shack4.01	29,276	
114		Add-on Components for Woodville	upon request	

Spooky Rookies

Page	*Item number*	*Name*	*Price in $*	*Remarks*
122	90.295.700.1	Wonderwalls.01	19,228	
125	90.295.700.2	Wonderwalls.02	22,018	
126	90.295.700.3	Wonderwalls.03	27,711	
		Extra charge 5 % for Mixed-Style, extra charge 9 % for Greenville-Style		
129	90.295.000.1	Spoo S.01 (Ragged-Style)	26,481	
129	90.295.100.1	Spoo M.01 (Ragged-Style)	29,997	*With Stainless Steel Slide*
130	90.295.100.3	Spoo M.03 (Ragged-Style)	48,745	*with Fast Lane slide*
130	90.295.100.6	Spoo M.06 (Greenville-Style)	42,936	*with Fast Lane slide – Greenville Style Shown*
130	90.295.100.8	Spoo M.08 (Greenville-Style)	44,068	*with Stainless Steel Slide – Greenville Style Shown*
131	90.295.600.3	Roo M.03 (Ragged-Style)	35,815	*with Stainless Steel Slide*
131	90.295.500.1	Roo S.01 (Ragged-Style)	28,565	*with Stainless Steel Slide*
132	90.295.600.2	Roo M.02 (Greenville -Style)	38,198	*with Stainless Steel Slide – Greenville Style Shown*
132	90.296.001	SpooRoo Combi.01 (Ragged-Style)	79,929	*With Stainless Steel Slide*
133	90.296.002	SpooRoo Combi.02 (Greenville-Style)	42,582	*Greenville Style Shown*
133	90.296.003	SpooRoo Combi.03 (Greenville-Style)	64,272	*With Stainless Steel Slide – Greenville Style Shown*
134		Add-on Components for Spoo & Roo	upon request	

Univers

143	90.137.001	Lunia L	403,511	*Price with wide-meshed railing net (contrary to image)*
143	90.135.001	Lunia M	355,067	*Price with wide-meshed railing net (contrary to image)*
145		Add-on Components for DNA Towers	upon request	
146	90.295.012	DNA Tower L.02	66,078	
146	90.293.463	DNA Tower L.03.02	131,738	*With Fast Lane Slide*
147	90.295.064	DNA Tower L.03.01	114,373	
	90.295.013	DNA Tower L.03	104,969	
147	90.295.014	DNA Tower L.04	132,989	
148	90.295.025	DNA Tower XL.03	155,711	
148	90.295.024	DNA Tower XL.02	110,964	
149	90.295.026	DNA Tower XL.04	192,234	
150	90.293.561	DNA Combi.04	319,500	*With Stainless Steel Slide*
154	90.100.043.1	The Globe	58,458	
156	90.100.043.3	The Cube L	61,917	
157	90.100.043.2	The Cube M	53,384	
158	90.100.043.6	Cubiron L	74,369	
159	90.100.043.5	Cubiron M	64,128	
160		Climbing Wall (HDPE) Cosmo	5,202	
160		Climbing Wall (HDPE) Cosmo S	4,351	
160		Climbing Ramp (HDPE) Cosmo	5,698	
160		Climbing Ramp (HDPE) Cosmo S	4,803	
160		Sliding Pole Cosmo	1,345	
160		Access Net Cosmo	3,062	
160		Access Net Cosmo S	2,486	
160		Rubber Mats Cosmo	3,728	
160		Rubber Mats Cosmo S	2,698	
160		Duck Jibe Cosmo	13,461	
160		Net Wall Cosmo	4,468	

Page	Item number	Name	Price in $	Remarks
160		Net Wall Cosmo S	3,722	
160		Net Ramp Cosmo	3,237	
160		Net Ramp Cosmo S	4,803	
160		Chalkboard Cosmo	5,202	
160		Banister Cosmo	5,153	
160		Banister Cosmo S	3,808	
		Extra charge 5 % for colored tubes		
161	90.112.200	Cosmo.20	82,337	
162	90.112.390	Cosmo.39	67,714	
162	90.110.120	Cosmo Base (without Rubber Mats)	42,434	
163	90.112.99.105	Cosmo.105	55,718	
164	90.112.99.111	Cosmo.111	47,635	
164	90.111.040	Cosmo S.04	49,167	
165	90.111.050	Cosmo S.05	45,450	
165	90.111.000	Cosmo S Base	36,300	
166		Add-on Components for Quadrifol	upon request	
167	71.133.000	Quadrifol Base	26,455	
168	71.133.004	Quadrifol.04	52,519	
168	71.133.006	Quadrifol.06	56,950	
169	71.133.001	Quadrifol.01	111,028	
170	71.133.002	Quadrifol.02	108,736	
171	71.133.003	Quadrifol.03	123,570	
173	90.100.045	Pluto	55,302	
173	90.100.115	Phoenix	64,287	
173	90.100.145	Pegasus	105,926	
174	90.140.224	Neptun XXL	243,827	
175	90.100.110	Neptun	34,692	
175	90.141.020	Neptun.17	133,790	*Price with Plastic Slide*
176	90.141.211	Neptun.20	89,814	*Price with Plastic Slide*
176	90.141.336	Neptun.22	78,729	*Price with Plastic Slide*
177	90.141.227	Irrland	352,881	
178	90.141.232	Jupiter XXL	199,471	
179	90.100.040	Jupiter	30,564	
179	98.100.040	Mini Jupiter	25,704	
179	90.140.027	Jupiter.03	45,319	
180	90.140.712	Jupiter.13	63,415	
180	90.140.001	Jupiter.07	90,721	*Priced with Stainless Steel Slide*
181	90.140.030	Jupiter.02	35,864	
181	90.140.921	Phoenix.02	142,800	
182	90.134.066	Spaceball M.01	56,585	
183	90.100.111	Spaceball L	33,081	
183	90.100.111	Spaceball L	39,624	*Stainless Steel*
183	90.100.041	Spaceball M	29,788	
183	90.100.041	Spaceball M	36,861	*Stainless Steel*
183	90.100.031	Spaceball S	27,637	
183	90.100.031	Spaceball S	32,617	*Stainless Steel*
184	90.100.020	Venus	20,174	
184	90.141.413	Mini Mars.03	27,370	*With Fast Lane Slide*
185	99.100.015	Maxi Mars	14,185	
185	90.100.010	Mars	13,147	

Page	Item number	Name	Price in $	Remarks
185	98.100.010	Mini Mars	10,219	
186	90.140.845	Pegasus.02	161,848	*With Stainless Steel Slide*
186	90.100.075	Uranus	82,409	
187	90.141.248	Roanoke Park	218,123	*With Stainless Steel Slide*
188–190		Add-on Components for Univers	upon request	

Polygodes

198	91.200.040	Pentagode XL	54,626	
199	91.200.030	Pentagode L	39,930	
199	91.200.020	Pentagode M	36,859	
199	91.200.010	Pentagode S	29,248	
202	712.000.5350	Tetragode 5350	29,218	*Masts of the Tetragodes are galvanized in standard version – extra Charges for Powdercoating*
202	712.000.9300	Tetragode 9300	83,432	
203	712.000.7400	Tetragode 7400	43,619	
203	712.000.6100	Tetragode 6100	34,254	
203	712.000.3850	Tetragode 3850	25,091	
204	712.000.7461.003	Tetragode 7461.03 (with crow's nest)	115,945	
205	712.000.3852	Tetragode 3852	43,855	
205	712.000.3854	Tetragode 3854	86,868	
206	712.000.2901	Trigode 2901	13,291	
208		Add-on Components for Polygodes	upon request	*Price depends on individual project*

Terranos & Terranova

216	95.173.294	Terrano.3294	172,270	
217	95.173.295	Terrano.3295	93,819	
218	95.171.728	Terrano.1728	93,920	
219	95.171.250	Terrano.1250	128,514	
219	95.172.059	Terrano.2059	111,764	
220	95.172.696	Terrano.2696	60,780	
220	95.171.895	Terrano.1895	36,770	
221	95.171.893	Terrano.1893	128,949	
221	95.172.474	Terrano.2474	34,649	
222	95.171.970	Terrano.1970	97,968	
222	95.171.627	Chessboard Cube.01	30,264	
223	95.173.532	Chessboard Cube.02	54,848	
224	95.180.010	Sculptura.01	21,196	
224	95.180.020	Sculptura.02	21,196	
224	95.180.030	Sculptura.03	21,196	
225	95.171.684	Octagon Star Climber	21,521	
225	95.170.658	Terrano.658	13,000	
226	95.171.726	Terrano.1726	21,013	
226	95.172.477	Terrano.2477	33,918	
227	95.171.935	Terrano.1935	77,578	
228	96.180.003	Terranova.3	119,639	
229	96.180.004	Terranova.4	54,642	
230	96.180.006	Terranova.6	32,806	
231	96.180.014	Terranova.14	47,879	
231	96.180.009	Terranova.9	101,120	

Page	Item number	Name	Price in $	Remarks
232	96.180.141	Terranova.141	32,678	
232	96.180.179	Terranova.179	18,135	
233	96.180.104	Terranova.104	47,953	
233	96.180.159	Terranova.159	9,700	
235		Add-on Components for Terranos & Terranova Curlies	upon request	
236	90.293.787	Curly045.01	34,780	
236	90.293.784	Curly1.02	40,445	
237	90.293.786	Curly2.02	57,008	*With Fast Lane Slide*
237	90.293.785	Curly3.02	upon request	
238	90.293.789	CurlyCombi.01	351,706	
239	90.293.791	CurlyCombi.02	101,687	
242–244		Add-on Components for Terranos & Terranova	upon request	

HodgePodge

251		Various Seat Elements	upon request	
252	90.260.501	Swingo.2.1	4,304	
252	90.260.503	Swingo.2.3	6,003	
252	90.260.502	Swingo.2.2	7,231	
252	90.260.504	Swingo.2.4	8,163	
253	90.160.140	Swingo.01	3,922	
253	90.160.150	Swingo.03	7,279	
253	90.160.141	Swingo.02	6,117	
253	90.160.151	Swingo.04	7,005	
254	90.340.049	Double Swingo 2.2	14,550	*1 × Standard Swing Seat, 2 × Toddler Seat, 1 × Inclusion Seat*
254	90.340.049	Double Swingo 2.2	11,183	*4 × Standard Swing Seat*
255	95.190.484	Elbow Swing	9,544	
255	90.260.510	Sky Swing	9,830	
257	90.260.533	Net Swing	11,246	
257	95.170.196	Hammock	8,111	*with balls*
258	95.190.263	Palmetto Saucer	5,082	
258	95.190.579	Palmetto Twins	9,831	
259	97.100.025	Cloud 9	9,928	
259	95.171.311	Double Cloud 9	18,016	
260	90.260.532	Bowl Swing	10,631	
260	90.260.531	Cup Swing	10,631	
261	90.260.534	Arch Swing	12,863	
261	90.340.055	Side-by-Side Swing	24,057	
262	95.190.725.001	Float Swing	57,738	
262	95.190.809	VIP Swing 2.0	20,737	
263	97.100.026	VIP Swing	11,837	
265	90.340.097	O'Tannebaum 3.1	15,768	
265	90.340.045	O'Tannebaum 2.5	11,653	
266	90.260.101	Eddie.01	4,123	
266	90.260.102	Eddie.02	4,123	
266	90.260.103	Eddie.03	4,123	
267	90.260.104	Eddie.04	4,123	
267	90.260.105	Eddie.05	5,012	
268	90.260.301.2	Disk XL	24,189	

Page	Item number	Name	Price in $	Remarks
268	90.260.301.1	Disk L	14,660	
269	90.260.304	Picadilly Circle.2.2	15,159	
269	90.260.305	Little Big Ben.2.2	10,101	
270	90.261.200	Access Whirl	upon request	
270	90.260.308	Fireball.3.1	10,227	
271	95.200.010	Albero.01	19,573	
271	95.200.020	Albero.02	27,110	
272	90.260.801	Abakus.2.1	12,997	
273	90.260.803	Butterfly	12,080	
273	90.260.802	Freeride	12,705	
274	90.260.201	Cat Tail.01	6,134	
274	90.260.202	Cat Tail.02	6,134	
274	90.260.203	Cat Tail.03	6,134	
275	90.260.930	Hula-Loop.01	5,769	
275	90.260.940	Hula-Loop.02	5,769	
276	90.260.615.1	Over Easy	8,651	
277	90.260.920	Swallow Tail	5,750	
277	90.260.910	Pin Tail	5,750	
278	90.260.614.1	Beetle.01	2,776	
278	90.260.614.2	Beetle.02	2,776	
278	90.260.614.3	Beetle.03	2,776	
279	90.261	Number.0 - 9	6,882	*Price per piece*
281	95.172.475	Parallelo	7,132	
281	95.190.010	Horizonto.3	7,291	
282	95.190.481	Calisthenics.02	86,124	
282	95.190.713	Calisthenics.05	49,639	
283	95.190.564	Calisthenics.03	58,341	
283	95.190.507	Calisthenics.04	58,341	
284	90.660.012.410.5	Bouncers.01	9,568	*incl. special coating*
284	90.660.012.410.6	Bouncers.02	12,884	*incl. special coating*
285	90.660.012.410.7	Bouncers.03	9,522	*incl. special coating*
285	90.660.012.410.8	Bouncers.04	12,539	*incl. special coating*
286	90.160.201	Cherry.100	2,271	
286	90.160.202	Cherry.140	2,440	
287	90.160.210.000.01	Orbit.01	3,993	
287	90.160.210.000.02	Orbit.02	5,455	
288	90.260.703	Dome.03	upon request	
288	90.260.701	Dome.01	upon request	
288	90.260.702	Dome.02	upon request	
288	90.260.601	White Water.04	30,017	
288	90.260.602	White Water.02	17,938	
288	90.260.603	White Water.03	23,987	
289	90.260.401	Spirelli.01	2,547	
289	90.260.402	Spirelli.02	3,610	
289	90.160.226	Champignon.60	479	
289	90.160.224	Champignon.40	442	
289	90.160.228	Champignon.80	515	
291	90.340.127	Satellights.01	50,679	
291	90.340.128	Satellights.02	52,998	
292	97.110.004	Speedway	22,105	*without launch platform max. 30 m*

Page	Item number	Name	Price in $	Remarks
292	97.110.013	Speedway.013	31,124	*with launch platform max. 30 m*
293	95.200.120	Wasp's Nest.120	20,260	*with balls*
293	90.130.003	Net House.02	30,712	
294	96.180.094	Sand Workshop	8,608	

UFOs

301	90.220.060	UFO.M6	56,999	
302	90.220.030	UFO.M3	32,995	
303	90.220.090	UFO.M9	85,308	*Extra charge 5 % for colored tubes*
304	90.220.020	UFO.M2	23,335	
304	90.220.010	UFO.M1	12,238	

Twist & Shout

309		Add-on Components for Twist & Shout	upon request	
311	90.100.043.4	Cloverwood	181,347	
312	90.297.001	Twist.01	55,018	
313	90.297.002	Twist.02	38,654	
314	90.297.003	Twist.03	34,375	
314	90.297.018	Twist.18	53,441	
315	90.297.029	Twist.29	112,634	
316	90.297.004	Twist.04	82,058	
317	90.297.005	Twist.05	145,264	
317	90.297.015	Twist.15	79,425	
318	95.190.458	Shout.11	upon request	
319	95.190.406	Shout.02	upon request	
320	95.190.603	Shout.08	upon request	
321	95.190.606	Shout.07	upon request	
322	95.190.480	Shout.12	upon request	
323	95.190.972	Shout.09	upon request	
323	95.190.449	Shout.04	upon request	
324	95.190.409	Shout.06	upon request	

Geos

331	95.190.131	Geoarena.01	264,140	
332	95.130.229	Geoball.029	127,785	
333	95.130.216	Geoball.16	118,528	
333	95.130.220	Geoball.20	108,964	
334	95.130.204	Geoball.04	99,798	
335	95.130.304	Geodom.04	727,126	
336		Add-on Components for Geos	upon request	

CombiNation

344	90.293.790	Fairview.05	247,646	*With Stainless Steel Slide*
345	90.180.757	Köln	upon request	*With Stainless Steel Slide*
346	90.293.519	Den Haag	258,723	*With Stainless Steel Slide*
347	95.190.474	Genk	upon request	
348	90.293.368	Orlando	194,855	*With Plastic Slide*

Page	Item number	Name	Price in $	Remarks
349	90.293.617	Livermore	361,212	*With Plastic Slides*
350	90.180.708	Fair Oaks	86,572	*With Fast Lane Slide*
350	90.136.124	Silver Lake	94,752	*With Fast Lane Slide*
351	90.293.277	Luxemburg	296,945	*With Stainless Steel Slide*
352	90.180.525	Folsom	97,828	*With Fast Lane Slide*
352	90.293.032	Celle	75,730	
353	95.190.338	Bobbejaanland	86,611	*With Stainless Steel Slide*
355	90.293.480	Monheim	257,444	*With Stainless Steel Slide*
356	90.180.620	Sacramento.01	49,678	*With Fast Lane Slide*
356	90.293.254	Offenbach	91,461	*With Stainless Steel Slide*
357	90.180.647	Dublin	184,439	*With Fast Lane Slide*
358	90.180.764	Springfield.05	104,747	*With Fast Lane Slide*
359	90.180.766	Fairview.06	235,971	*With Fast Lane Slide*
360	90.180.767	Franklin.04	317,271	*With Fast Lane Slide*
361	90.180.765	Riverside.05	126,765	*With Fast Lane Slide*
362	90.180.329	Grandview	366,646	*With Stainless Steel Slide*
362	90.180.673	Sacramento.02	75,624	
363	90.180.486	Landsberger Allee	374,517	*With Stainless Steel Slide*
364	90.141.273	Greensboro	786,722	*With Stainless Steel Slide*
366	90.180.313	South Jordan	110,150	
366	90.180.291	Arlington	181,690	*With Plastic Slide*
367	98.140.094	Mountain House	84,689	*With Fast Lane Slide*
367	90.150.350.003	Warneburg	176,115	*With Stainless Steel Slide*
368	90.180.358	Vancouver.01	91,014	
368	90.136.097	Boston	61,499	
369	90.180.596	Regensburg	119,955	
370	95.190.413	Bad Schwalbach	305,147	
371	90.180.311	Walldorf	199,730	*With Stainless Steel Slide*
372	90.180.761	Berlin.11	306,955	*With Stainless Steel Slide*

IKO

	70.100.123	IKO S	16,730	
	70.100.135	IKO M	20,039	
	70.100.147	IKO L	24,530	

Vario

	US.70.300.135.000	Vario M	15,800	
	US.70.300.135.005	Vario.M.05	24,121	
	US.70.300.135.008	Vario.M.08	29,670	
	US.70.300.135.009	Vario.M.09	33,745	

Replacement nets for Univers Classics

	98.101.010	Replacement net for Mini Mars	5,797	*incl. all fixings to structure*
	90.101.010	Replacement net for Mars	6,941	*incl. all fixings to structure*
	90.101.015	Replacement net for Maxi Mars	7,671	*incl. all fixings to structure*
	90.101.020	Replacement net for Venus	11,652	*incl. all fixings to structure*
	90.101.040	Replacement net for Jupiter	20,435	*incl. all fixings to structure*

Page	*Item number*	*Name*	*Price in $*	*Remarks*
	98.100.040	Replacement net for Mini Jupiter	18,795	*incl. all fixings to structure*
	90.101.110	Replacement net for Neptun	22,690	*incl. all fixings to structure*
	90.101.031	Replacement net for Spaceball S	16,629	*incl. all fixings to structure*
	90.101.041	Replacement net for Spaceball M	20,435	*incl. all fixings to structure*
	90.101.111	Replacement net for Spaceball L	22,776	*incl. all fixings to structure*
	90.101.601	Replacement net for Spaceball XL	24,240	*incl. all fixings to structure*
	90.101.075	Replacement net for Uranus	23,276	*incl. all fixings to structure*
	92.112.001	Replacement net for Cosmo	18,007	*incl. all fixings to structure*
	90.101.045	Replacement net for Pluto	20,435	*incl. all fixings to structure*
	90.101.115	Replacement net for Phoenix	22,690	*incl. all fixings to structure*
	90.101.145	Replacement net for Pegasus	24,240	*incl. all fixings to structure*
	90.101.030	Replacement net for Merkur	15,457	*incl. all fixings to structure*

P: 877-348-3647 Email: sales@dogonitparks.com

Current Product Pricing

Prices Effective 01/01/24 - Note: Pricing May Change at Any Time

Item #	Description	Complete System #1015	Small Dog System #1007	List Price
	PACKAGES: INCLUDES 5% DISCOUNT OFF INDIVIDUAL UNIT PRICING & ALL AGILITY PACKAGES INCLUDE A FREE FIRE HYDRANT OR 3 FENCE SILHOUETTES			
1007	Small Dog System (7 activities) - SD			9,063
1015	Complete System (13 activities plus Custom Rules Sign and Pet Parking Post) - CS			20,724
1016	Bronze Package (#6403, 6522, 6602, 6703)			3,928
1017	Silver Package (#6402, 6516, 6521, 6601, 6703)			6,474
1018	Gold Package (#6402, 6415, 6516, 6520, 6601, 6602, 6703)			8,227
1019	Canine Courtyard™ Essentials (#CC5401, 5502, 5601, 5620, 5621)			4,878
1020	Absolute Basics Amenities Kit (7202, 7502, 6902, 7408)			2,883
1021	Basics Plus Amenities Kit (7202, 7502, 6902, 7260, 7230, 7408)			4,251
1022	Pet Relief Kit (7408, 7260 - Custom, 6902, 7232)			1,700
1023	NatureDog™ System (ND7101, ND7102, ND7103, ND7110, ND7111, ND7120 & ND7121)			12,806
1025	Canine Courtyard Deluxe Kit (CC5403, CC5404, CC5405, CC5502, CC5602, CC5604, CC5706)			8,051
	AGILITY ACTIVITIES: CLASSIC LINE - STANDARD COLORS: RED, BLUE, BLACK OR GREEN			
	Please note either "R", "B", "K" or "G" for color selection, i.e. - 6401R or 6401G			
6401	A-Frame	CS		2,860
6402	Dog Walk Ramp	CS		2,590
6403	Wait Table, 8" High		SD	845
6404	Wait Table, 16" High	CS		845
6405	Step Up Table			1,840
6404	Bow Wow Ramp			3,985
6412	Teeter-Totter, 10'	CS		2,005
6413	Agility Walk (Set of 5)	CS	SD	1,415
6415	Hound Hoops (Set of 5)	CS		1,205
6509	Hound Hurdles (Set of 4)	CS	SD	1,515
6510	Dog House Run (Set of 3)			1,995
6516	Flexible Weave Poles (Set of 6)	CS	SD	1,210
6520	Adjustable Tire Jump	CS		1,220
6521	Adjustable Jump Bar	CS	SD	1,090
6522	Double Hoop Jump			1,260
6523	Single Hoop Jump			725
6601	Wall Jump, 1 plank		SD	405
6602	Wall Jump, 2 planks	CS		510
6603	Wall Jump, 3 planks	CS		615
6606	Tri-Level Jump			1,060
6703	3' Bow Wow Barrel - Tube Colors: Blue, Red or Green			1,520
6704	3' Bow Wow Barrel w/ Custom Doghouse (Make it a double! Add an addt'l doghouse for $830.00)			2,360
6706	6' Bow Wow Barrel			2,225
6707	6' Bow Wow Barrel w/ Custom Doghouse (Make it a double! Add an addt'l doghouse for $830.00)	CS	SD	3,060
6709	9' Bow Wow Barrel			2,930
6710	9' Bow Wow Barrel w/ Single Doghouse			3,765

	AGILITY ACTIVITES: CANINE COURTYARD™ - STANDARD COLORS: RED, BLUE, BLACK OR GREEN	
	Please note either "R, "B", "K" or "G" for color selection, i.e. - CC5401R or CC5401G	
CC5401	**Corgi Climb**	**1,605**
CC5402	**Whippet Walk**	**2,315**
CC5403	**Dachshund Double Ramp**	**2,530**
CC5404	**Dalmatian Discs (Set of 4)**	**1,165**
CC5405	**Samoyed Sit & Stay**	**650**
CC5406	**Scottie Seesaw, 7'**	**1,665**
CC5501	**Sheltie Shimmy Poles (Set of 4)**	**805**
CC5502	**Collie Crawl**	**1,740**
CC5601	**Pointer Plank Jump, 1 plank**	**365**
CC5602	**Pointer Plank Jump, 2 planks**	**470**
CC5603	**Westie Window Jump**	**705**
CC5604	**Beagle Bone Jump**	**510**
CC5620	**Husky Triple Hoop**	**730**
CC5621	**Spaniel Single Hoop Jump**	**695**
	AGILITY ACTIVITIES: NATUREDOG™	
ND7101	**Terrier Tunnel**	**1,580**
ND7102	**Dog Through the Log, 4'**	**2,935**
ND7103	**Dog Leg Walk (Set of 2)**	**2,370**
ND7110	**Little Stump Jump**	**895**
ND7111	**Big Stump Jump**	**1,155**
ND7120	**Small Boulder**	**1,740**
ND7121	**Large Boulder**	**2,835**
ND7122	**Stepping Stones (Set of 3)**	**1,965**
	GROOMING SOLUTIONS - Visit our website for more options!	
PW7220	**Stainless Steel Pedestal Dual Dog Wash Station with Leash/Hose Hook**	**2,030**
PW7300	**58" Walk In Pet Wash with Plumbing Kit & Raised Floor Grate (ADA Accessible)**	**3,480**
PW7301	**58" Elite Pet Wash with Plumbing Kit & Raised Floor Grate**	**5,025**
PW7302	**58" ADA Elite Pet Wash with Plumbing Kit & Raised Floor Grate**	**5,300**
	Stainless Steel Shampoo Bottle Holder (PW7300 - PW7302)	**115**
	Stainless Steel Tub Shelf (PW7300 - PW7302)	**245**
PW7303	**Hydraulic Grooming Table w/ Arm - 24"W x 48"L**	**1,490**
PW7304	**Stainless Steel Stationary Grooming Table w/ Arm - 36"H x 48"L**	**1,420**
PW7305	**K9 Dryer - Includes Wall Mount Bracket**	**440**
	FOUNTAINS (ALL STAINLESS STEEL) & WATER FEATURES	
7210	**Pedestal Fountain w/Pet Bowl**	**5,190**
7211	**Barrier Free Drinking Fountain w/Pet Bowl**	**5,475**
7212	**Barrier Free Bi-Level Drinking Fountain w/Pet Bowl**	**6,200**
7213	**Pedestal Dog Watering Station**	**2,985**
7214	**Deluxe Dog Watering Station w/Hose Bibb & Leash/Hose Hook**	**3,760**
7215	**Pedestal Fountain w/2 Pet Bowls**	**6,770**
7216	**Pet Fountain: Free Standing or Wall Mount**	**1,835**
7217	**Pedestal w/Bottle Filler & Pet Bowl**	**5,030**
7218	**Pet Fountain w/Shower**	**4,630**
7219	**Barrier Free Fountain w/Bottle Filler & Pet Bowl**	**7,240**
7224	**Dual Dog Watering Station - 2 Pet Bowls**	**3,420**
7229	**Dream Fountain: Barrier Free Bubbler, 2 Pet Bowls, Waste Bag Dispenser & Treat Canister**	**8,500**
FRU1	**Freeze Resistant Valve - 1 Outlet (For 7210 - 7229 Units)**	**1,395**
FRU2	**Freeze Resistant Valves - 2 Outlets (For 7210 - 7229 Units)**	**1,995**
FRU3	**Freeze Resistant Valves - 3 Outlets (For 7210 - 7229 Units)**	**2,590**
HBC	**Compression Hose Bibb (For 7210 - 7229 Units)**	**345**
HBVR	**Vandal Resistant Hose Bibb (For 7210 - 7229 Units)**	**510**
7270	**Spray Fire Hydrant**	**1,565**
7280	**Top Spray Fire Hydrant**	**2,125**

BENCHES & TABLES

7201	Deluxe Dog Paw Bench, 6'		1,610
7202P	Dog Paw Bench, 6' (Portable)		845
7202IG	Dog Paw Bench, 6' (Inground)		845
7202SM	Dog Paw Bench, 6' (Surface Mount)		845
7207	Top Dog Picnic Table		1,690
R7002	HDPE Deluxe Eco Bench, 6'		740
R7003	HDPE Contemporary Bench, 6'		1,165
R7004	HDPE Elite Bench, 6'		1,045
R7018	HDPE A-Frame Table, 6'		1,600
R7019	HDPE A-Frame Table, 6', ADA		1,835
R7030	HDPE Hexagon Table		1,605
R7031	HDPE Hexagon Table, ADA		1,475
CC5704	Biscuit Bone Seat, 4'		955
CC5705	Biscuit Bone Bench (w/ Back), 4'		1,260
CC5706	Biscuit Bone Seat, 6'		1,410
CC5707	Biscuit Bone Bench (w/Back), 6'		1,835
CC5708	Biscuit Bone Bench, 6' - Portable		2,095

AMENITIES & SIGNAGE

6902/CC5850	Pet Parking Post	CS	710
6903	Custom Leash Hook		410
7230	Custom Dog Park Rules Sign	CS	965
7232-7237	Dog Park Signs - 9" x 12"		
	7232 - "Be Responsible! Clean Up After Your Dog"		40
	7233 - "Designated Dog Area - For Residents Only"		40
	7234 - "Please! Clean Up After Your Dog"		40
	7235 - "Please Pick Up After Your Pet"		40
	7236 - "Large Dog Area - 30 Lbs and Over"		40
	7237 - "Small Dog Area - Under 30 Lbs"		40
7238	Custom Bone Sign		215
7239	Standard Dog Park Rules Sign (24"x36") - Colors: Black or Green		180
7403	Hand Sanitizer Station - HDPE, Optional Post/Hands Free Addt'l Charge		660
7260	Standard Fire Hydrant		475
7260 - C	Custom Color (Pantone or RGB)		60
7260 - D	Dalmatian Paint		125
7260 - L	Custom Logo		175
7290-7331	Silhouettes: (Average Size: 24"H x 16-20"L)		
	7290 - Labrador		180
	7291 - Dachshund		180
	7292 - Pointer		180
	7293 - Basset Hound		180
	7294 - Beagle		180
	7295 - Bichon		180
	7296 - Blue Tick Hound		180
	7297 - Scottie		180
	7299 - Vizsla		180
	7300 - French Bulldog		180
	7301 - Collie		180
	7302 - Saint Bernard		180
	7303 - Corgi		180
	7331 - Dog Paw		155
	7332 - Dog Bone		155

TRASH RECEPTACLES

7501	22 Gallon "Pet Waste" Receptacle w/Flat Lid & Liner	1,000
7502	32 Gallon "Trash Only" Receptacle w/Flat Lid & Liner	1,090
R7015	HDPE 32 Gallon Receptacle w/Flat Lid & Liner	915
R7016	HDPE 22 Gallon Receptacle	655

PET WASTE SOLUTIONS - PICK UP STATIONS, REFILL BAGS & MORE

7400	**Rover Relief Area: 4' x 4' Aluminum Basin, Turf Pod, Fire Hydrant and Plumbing Kit**	**4,515**
7402	**Bark Bin™ Pet Waste Station - Colors: Black, Gray or Green**	**950**
7404R	**Elite Pet Waste Station w/Locking Receptacle - Roll Bag**	**695**
7404S	**Elite Pet Waste Station w/Locking Receptacle - Single Pull Bag**	**695**
7408R	**Complete Dog Waste Station - Roll Bag**	**390**
7408S	**Complete Dog Waste Station - Single Pull Bag**	**390**
7409R	**Mini Dog Waste Station w/roll bag**	**245**
7409S	**Mini Dog Waste Station w/single pull**	**245**
	Solar Light for 7404, 7408-7409 Stations	**25**
	Surface Mount Plate for 7404, 7408-7409 Stations	**115**
7410R	**Roll Bag Dispenser**	**115**
7410S	**Single Pull Bag Dispenser**	**115**
7411	**Waste Can w/Lid, 11 Gal Square or 10 Gal Round**	**235**
7412	**Waste Can Liners, case of 200**	**105**
7413	**Roll Bags, case of 2,000**	**95**
7414	**Roll Bags, case of 6,000**	**255**
7415	**Single Pull Bags - Box of 800**	**70**
7416	**Single Pull Bags, Case of 3200**	**170**
7417	**Good Human Bags, Case of 2000 - 100% Recycled Content**	**95**

SHADE SHELTERS - Call or Email for Pricing. Ask About Custom Designs!

8202	**12' Square Umbrella, 8' eave - Includes sealed drawings**	
8203	**20' x 20', 8' eave - Includes sealed drawings**	
8205	**30' x 20, 8' eave - includes sealed drawings**	

SURFACING SOLUTIONS

EWF	**Woof Fiber™ - Engineered Wood Fiber - *Call for quote***	
MESH	**Grass Guardian Reinforcement Mesh - 430SF Roll - *Call for quote***	
PODS	**Synthetic Turf Pods (Hard Surface Applications) - *Call for quote***	

Prices subject to change without notice

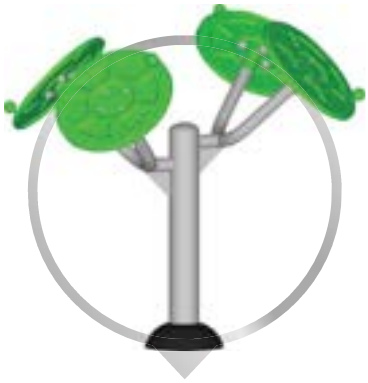
2024 EXOFIT CHILDREN'S FITNESS
PRICE LIST

ExoFit Outdoor Fitness



Children's Elliptical Cross Trainer
Product ID: CECT

$2,693.00



Children's Tai Chi Spinners
Product ID: CTCS

$2,198.00



Childern's Seated Leg Press
Product ID: CSLP II

$3,518.00



Children's Double Air Walker
Product ID: CDAW

$3,298.00



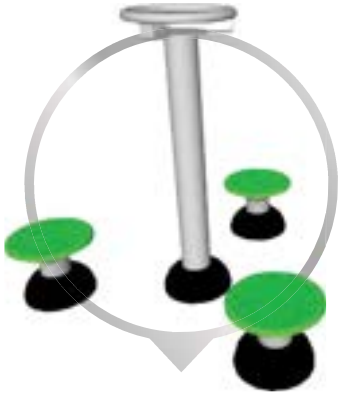
Children's Double Cross Country Skier
Product ID: CDCCS

$3,518.00



Children's Air Skier
Product ID: CAS

$2,055.00



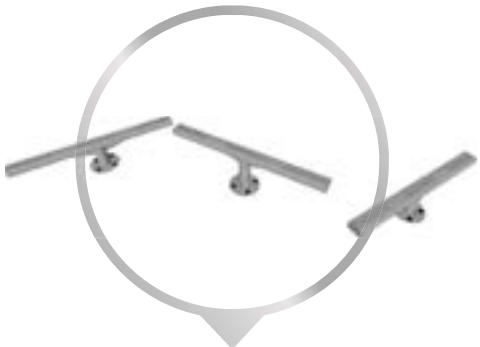
Children's Triple Twister
Product ID: CHT II

$1,934.00



Children's Rider
Product ID: CR

$1,813.00



Balance Beams
Product ID: BB

$1,450.00

2024 EXOFIT PRICE LIST

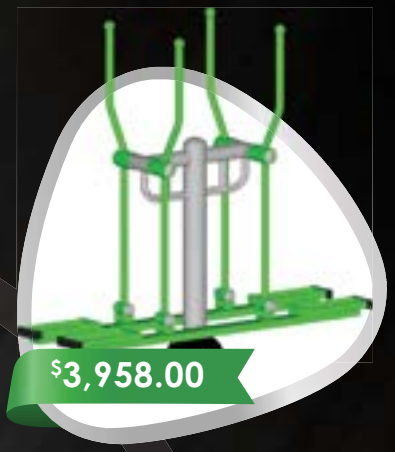
ExoFit
Outdoor Fitness



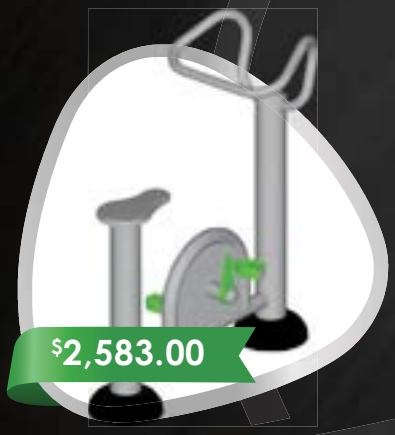
Air Walker
Product ID: AW



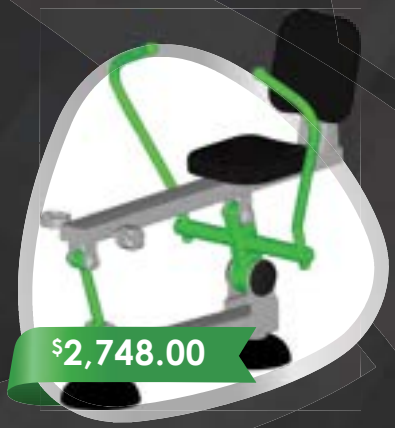
Double Air Walker
Product ID: DAW



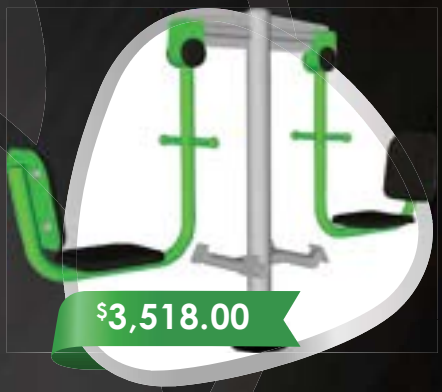
2-Person Cross Skier
Product ID: DCCS



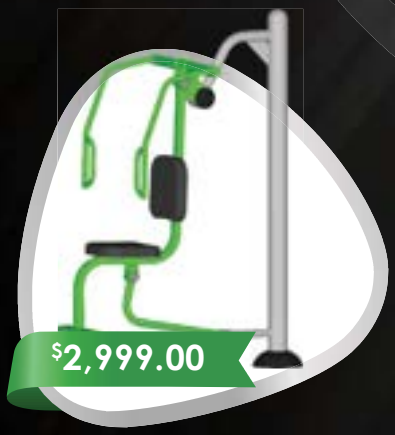
Fitness Bike
Product ID: B



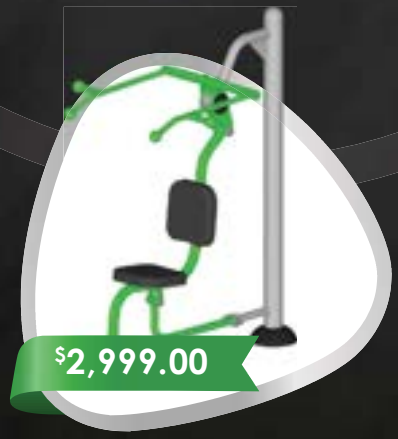
Rowing Machine
Product ID: SWR



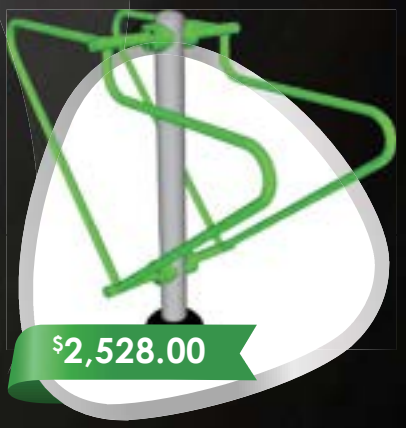
2-Person Leg Press
Product ID: SLP II



Chest Press
Product ID: SCP



Lat Pull Down
Product ID: PDC

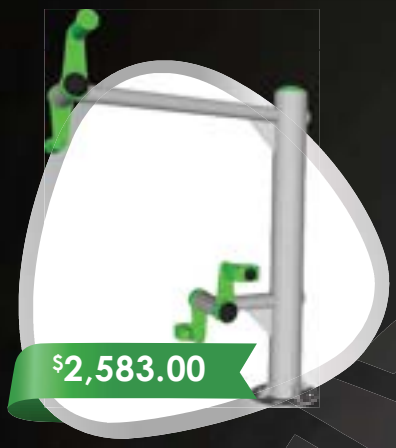


Push-up/Dip Station
Product ID: PUDS

www.Exo.Fit 800-527-0797 info@Exo.Fit

2024 EXOFIT PRICE LIST

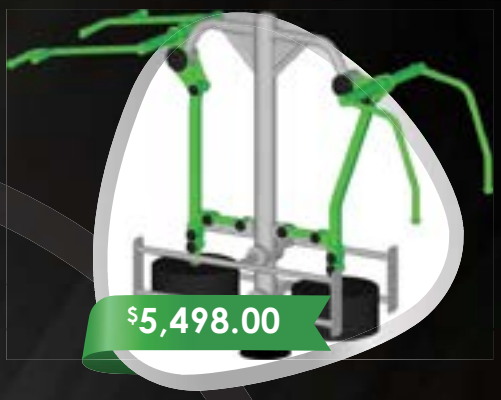
ExoFit
Outdoor Fitness



WC Arm/Foot Wheel
Product ID: DAPB II



WC Tai Chi Spinners
Product ID: DTCS



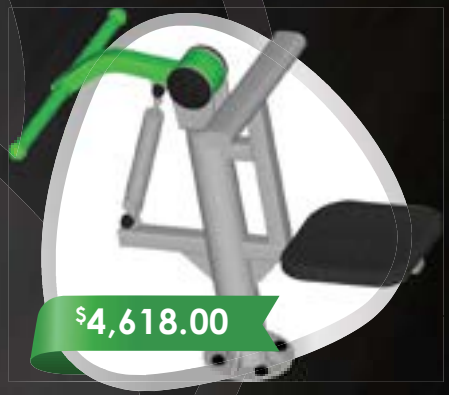
WC Chest/Lat Combo
Product ID: DC II



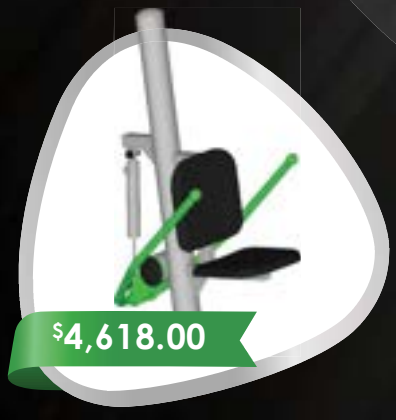
Resistance Squat Machine
Product ID: RSS



Resistance Stepper
Product ID: RS



Resistance Bicep Curl
Product ID: RBC



Resistance Tricep Press
Product ID: RTP



Resistance Chest Press
Product ID: RCP



Resistance Vertical Press
Product ID: RSP

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2024 EXOFIT PRICE LIST

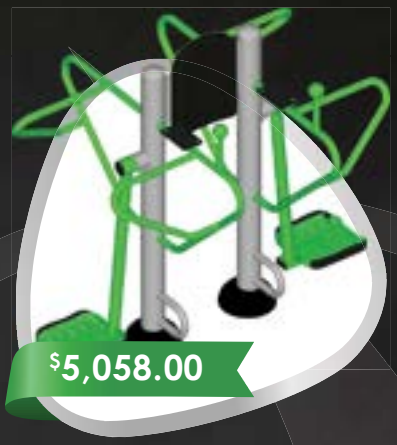
ExoFit
Outdoor Fitness



$3,463.00

Twist & Step

Product ID: TS II



$5,058.00

4-Person Combo

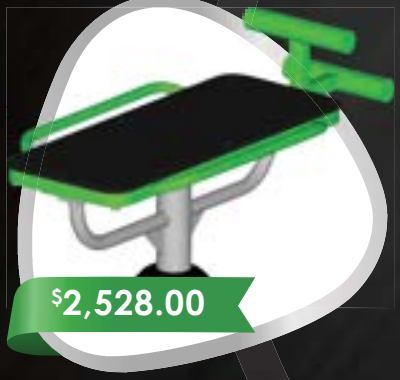
Product ID: 4PC



$1,450.00

Balance Beams

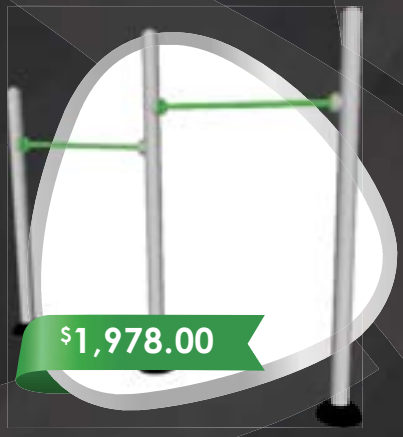
Product ID: BB



$2,528.00

Sit-up Bench

Product ID: SSUB



$1,978.00

Double Pull-up Bars

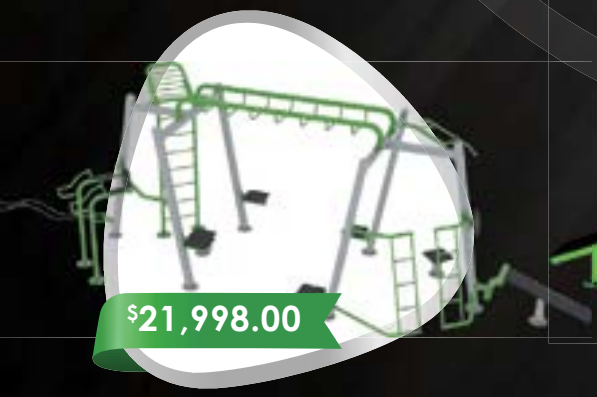
Product ID: CUB



$20,898.00

ExoPod

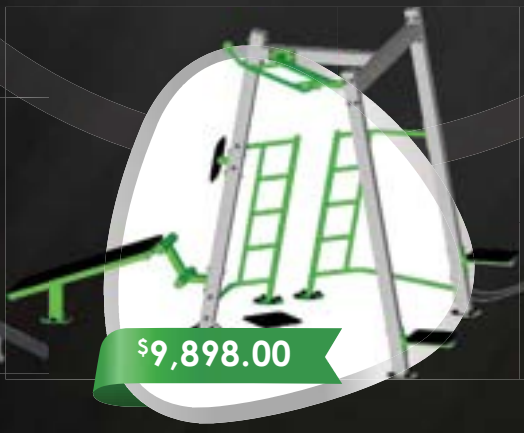
Product ID: EP



$21,998.00

ExoCage

Product ID: ECC



$9,898.00

CagePod 1

Product ID: CP1



$9,898.00

Cage Pod 2

Product ID: CP2

www.Exo.Fit 800-527-0797 info@Exo.Fit

Revised 2/14/2024

Playmore West, Inc.
2024 Surfacing and Installation Services Price List

Engineered Wood Fiber
Companies – Zeager, The Mulch and Soil Co., The Recreational Group/Mulch Outfitters

Engineered Wood Fiber	per cubic yard	$35.00
GeoTex Duraliner	per roll	$300.00

Freight not included. See installation pricing table for installation prices.

Rubber Mulch
Companies – Rubber Designs, Ground Smart

Rubber Mulch	per 50 lb bag	$50.00

Minimum Order $2,000.00 Freight not included. See installation pricing table for installation prices.

Borders
Company – APS, Childforms, Playworld

Plastic Playground Border 4’	$83.00
Plastic Playground Border 2’	$65.00
Plastic Playground Border 1’	$55.00
Playground Border End Cap	$55.00
Playground Border ADA Ramp	$1,955.00

Freight not included. See installation pricing table for installation prices.

Poured in Place EPDM and Bonded Rubber
Companies – The Recreational Group/XGrass, Robertson/Tot Turf, Rubber Designs, Vitriturf, No Fault, Pro-Techs

Poured in Place EPDM - Price per Square Foot for 50% Color 50% Black, standard edge, EPDM Top 1/2" thick, Aromatic, 2000+ Square Feet, Delivered and Installed
$21.90 per square foot – 4' Critical Fall Height
$23.05 per square foot – 5' Critical Fall Height
$24.25 per square foot – 6' Critical Fall Height
$25.95 per square foot – 8' Critical Fall Height
$27.20 per square foot – 9' Critical Fall Height
$29.90 per square foot – 10' Critical Fall Height
$34.60 per square foot – 12' Critical Fall Height

Bonded Rubber – Price per Square Foot, Bi/Tri colored rubber mulch, bonded
$21.65 per square foot – 4' Critical Fall Height
$23.40 per square foot – 6' Critical Fall Height
$24.05 per square foot – 8' Critical Fall Height

Options:
Add $2.50 per square foot for TK system
Add $3.70 per square foot for 100% color
Add $7.20 per square foot for Aliphatic Urethane
Add $2.50 per square foot for Special/Premium Color

Maintenance and Repairs:
$16.00 per square foot, 1/2" EPDM Recap 50% Black, 50% Color
$7.00 per square foot, Aromatic Roll Coat
$8.00 per square foot, Aliphatic Roll Coat
$40.00 per square foot, cut out and replace/repair damage

Minimum order $8,000.00. For projects under 2000 sf, projects will need to be priced individually. Sub-base not included, see installation pricing table for pricing.

Artificial Turf
Companies – The Recreational Group/XGrass, Forever Lawn, Robertson/Tot Turf, Sunshine Turf

Pricing based on 2000+ sf install, includes the synthetic turf, pad, 3.5 lbs per sf of infill material, crushed stone base and installation labor.

Turf Blend - 6' Critical Fall Height	$25.00 /sf
Turf Blend - 8' Critical Fall Height	$27.50 /sf
Turf Blend -12' Critical Fall Height	$29.00 /sf

60 oz is available for $1.15 more a square foot.
72 oz is available for $1.55 more a square foot.
80 oz is available for $2.10 more a square foot.
100 oz is available for $2.65 more a square foot.

Minimum order $9,500.00, for projects under 2000 sf, projects will need to be priced individually.

Playmore West, Inc.
10271 Deer Run Farms Rd., Suite 1
Fort Myers, FL 33966
info@playmoreonline.com
888-886-3757

Playmore Recreational Products and Services
Installation Price List

Installation Item	List	Min. List
Playmore to Receive Deliveries.	$ 1,725.00	
Installation of New Play Equipment/ PSI Site Furnishings.	40%	$ 4,025.00
Installation of PG Integrated Shade.	147%	$ 6,900.00
Installation of Replacement Parts.	60%	$ 3,450.00
Installation of Site Furnishings.	69%	$ 3,450.00
Installation of Athletic Equipment (Goals, Nets, Posts, etc.).	104%	$ 3,450.00
Install Engineered Wood Fiber. Per Cubic Yard.	$ 24.15	$ 3,018.75
Install Rubber Mulch. Per Cubic Yard.	$ 60.38	$ 3,450.00
Install Fabric. Per Roll	$ 431.25	$ 431.25
Installation of Shelters (deduct 1/3 if footings by others).	104%	$ 6,900.00
Installation of Shades.	147%	$ 6,900.00
Excavation. Leave on Site. Per Cubic Yard.	$ 129.38	$ 6,037.50
Excavation. Take off Site. Per Cubic Yard.	$ 172.50	$ 7,546.88
PIP Prep. Flood Area. Compact Loose Soil. Final Grade. Per SF.	$ 3.45	$ 5,175.00
Concrete Curb Up to 6" x 12". Per Linear Foot.	$ 60.38	$ 5,175.00
Concrete Pad w./ Fiber Mesh. Up to 6". Per Square Foot.	$ 25.88	$ 3,450.00
Crushed Stone/Rock Base. Up to 6". Per Square Foot	$ 7.00	$ 3,450.00
Engineered Drawings - Playgrounds.	$ 2,156.25	
Engineered Drawings - Other	$ 2,156.25	
Installation Supervisors - (Min. 2). Per Day (Does not include needed materials and tools)	$ 4,312.50	
Removal of Existing Equipment (Per Amount to Fill a 30yd. Dumpster).	$ 6,037.50	
Disposal Fee (Per 30 yd. Dumpster).	$ 2,156.25	
Disposal Fee (Per 30 yd. Dumpster). Cocrete, Rock, Rubber.	$ 4,312.50	
Dumpster	$ 2,156.25	
Mobile Mini	$ 2,587.50	
Private Utility Locate	$ 2,587.50	

5% to be added to entire quote on all projects (school districts exempt) that require building permit either as a line item, or added to install items. Deduct 2% if fees are waived.

3% to be added to entire quote on all projects that require payment and performance bond as a line item.

Minimums apply to each category.

Shade/Shelter Install includes footings, anchors, dewatering, machinery, and dumpster.

All prices based on good access.

Category	Part Number	DESCRIPTION	List Price ($ USD)	Weight (lbs)	ASTM Certified	CPSC Compliant	CSA Certified	EN Certified
Origins	ZZBD0012	ORIGINS BENCH BOULDER	$ 3,068	1160.00	T	T	T	T
Origins	ZZBD0013	ORIGINS PICNIC BOULDER	$ 10,719	3600.00	T	T	T	T
Origins	ZZBD0014	ORIGINS TOWER BOULDER	$ 18,330	4640.00	T	T	T	T
Origins	ZZBD0015	ORIGINS RIDGE BOULDER	$ 26,088	7830.00	T	T	T	T
Origins	ZZBD0016	ORIGINS CASTLE BOULDER	$ 39,210	13920.00	T	T	T	T
Origins	ZZBD0018	10 FT MOD X	$ 1,419	9.89	T	T	T	T
Origins	ZZBD0019	ORIGINS BOULDER TIGHT ROPE	$ 1,103	9.35	T	T	T	T
Origins	ZZBD0020	ORIGINS BOULDER ROPE BRIDGE	$ 4,957	79.80	T	T	T	T
Origins	ZZBD0027	ORIGINS ROCK LOG	$ 12,291	3300.00	T	T	T	T
Origins	ZZBD0030	ORIGINS HILL SLIDE BOULDER - ROCK ONLY	$ 5,641	1000.00	T	T	T	T
Origins	ZZBD0031	ORIGINS HILL SLIDE BOULDER SLITHER SLIDE ENTRANCE/EXIT	$ 2,179	90.51	T	T	T	T
Origins	ZZBD0031S	ORIGINS HILL SLIDE BOULDER SLITHER SLIDE ENTRANCE/EXIT (SM)	$ 2,179	81.37	T	T	T	T
Boulders	ZZBD0033	HILL SLITHER SLIDE ENTRY/ SLIDE-A-SIDE	$ 2,606	127.8	T	T	T	T
Boulders	ZZBD0033S	HILL SLITHER SLIDE ENTRY/ SLIDE-A-SIDE (SM)	$ 2,606	117.1	T	T	T	T
ThemedPlay	ZZPD3370	"STOP" SIGN WITH SIGN STAND	$ 225	8.95	T	T	T	F
ThemedPlay	ZZPD3380	"YIELD" SIGN WITH SIGN STAND	$ 265	8.95	T	T	T	F
ThemedPlay	ZZPD3390	"SPEED LIMIT" SIGN WITH SIGN STAND	$ 218	8.95	T	T	T	F
ThemedPlay	ZZPD3400	"HANDICAPPED" SIGN WITH SIGN STAND	$ 218	8.95	T	T	T	F
ThemedPlay	ZZPD3410	"SCHOOL ZONE" SIGN WITH SIGN STAND	$ 218	8.95	T	T	T	F
ToddlerTheme	ZZPD3450	TRAFFIC LIGHT	$ 906	22.39	T	T	T	F
FunCenters	ZZPD5051	INFANT FUN CENTER	$ 5,489	216.50	F	F	F	F
FunCenters	ZZPD5115	FUNCENTER A & B 36IN GLIDE SLIDE	$ 1,201	87.14	F	F	F	F
FunCenters	ZZPD5116	TODDLER FUNCENTER 24IN GLIDE SLIDE	$ 1,044	85.45	F	F	F	F
FunCenters	ZZPD5117	MEGA FUNCENTER 90 DEG GLIDE SLIDE	$ 1,099	84.04	F	F	F	F
FunCenters	ZZPD5230	ANCHOR STAKE	$ 29	1.31	F	F	F	F
FirstPlay	ZZPD5236	FIRSTPLAY INFANT FUN CENTER	$ 4,101	141.40	T	T	T	T
PLAYTIME	ZZTP2008M	LADYBUG HILL TUNNEL CLIMBER	$ 8,322	166.2	T	T	T	T
PLAYTIME	ZZTP2008MS	LADYBUG HILL TUNNEL CLIMBER (SM)	$ 8,322	166.7	T	T	T	T
PLAYTIME	ZZTP2017M	GATOR CLIMBER	$ 7,697	108.6	T	T	T	T
PLAYTIME	ZZTP2017MS	GATOR CLIMBER (SM)	$ 7,697	120	T	T	T	T
PLAYTIME	ZZTP2018M	JUNGLE ROCK LINK	$ 14,299	385	T	T	T	T
PLAYTIME	ZZTP2018MS	JUNGLE ROCK LINK (SM)	$ 14,299	403	T	T	T	T
PLAYTIME	ZZTP2020M	TUSCON TURTLE CLIMBER	$ 7,813	193	T	T	T	T
PLAYTIME	ZZTP2020MS	TUSCON TURTLE CLIMBER (SM)	$ 7,813	182.6	T	T	T	T
PLAYTIME	ZZTP2021M	FROG CLIMBER	$ 9,138	182.7	T	T	T	T
PLAYTIME	ZZTP2021MS	FROG CLIMBER (SM)	$ 9,138	183.2	T	T	T	T
PLAYTIME	ZZTP2022M	MONARCH BUTTERFLY CLIMBER	$ 8,970	177.2	T	T	T	T
PLAYTIME	ZZTP2022MS	MONARCH BUTTERFLY CLIMBER (SM)	$ 8,970	177.7	T	T	T	T
PLAYTIME	ZZTP2023M	MUSHROOM PATH STEPPER	$ 9,611	160.7	T	T	T	T
PLAYTIME	ZZTP2023MS	MUSHROOM PATH STEPPER (SM)	$ 9,611	177.7	T	T	T	T
PLAYTIME	ZZTP2026M	WHALE TAIL	$ 6,777	243	T	T	T	T
PLAYTIME	ZZTP2026MS	WHALE TAIL (SM)	$ 6,777	251	T	T	T	T
PLAYTIME	ZZTP2030M	INCHWORM CLIMBER	$ 6,523	105.3	T	T	T	T
PLAYTIME	ZZTP2030MS	INCHWORM CLIMBER (SM)	$ 6,523	116.7	T	T	T	T
PLAYTIME	ZZTP2036M	LADYBUG	$ 5,093	120	T	T	T	T
PLAYTIME	ZZTP2036MS	LADYBUG (SM)	$ 5,093	141	T	T	T	T
PLAYTIME	ZZTP2037M	CORAL REEF CLIMBER	$ 16,292	402	T	T	T	T

PLAYTIME	ZZTP2037MS	CORAL REEF CLIMBER (SM)	$ 16,292	427	T	T	T	T
PLAYTIME	ZZTP2104M	BUNNY	$ 3,738	105	T	T	T	T
PLAYTIME	ZZTP2104MS	BUNNY (SM)	$ 3,738	126	T	T	T	T
PLAYTIME	ZZTP2121M	WHALE	$ 11,445	344	T	T	T	T
PLAYTIME	ZZTP2121MS	WHALE (SM)	$ 11,445	359	T	T	T	T
PLAYTIME	ZZTP2134M	JUNGLE ROCK CLIMBER	$ 15,543	512	T	T	T	T
PLAYTIME	ZZTP2134MS	JUNGLE ROCK CLIMBER (SM)	$ 15,543	544	T	T	T	T
PLAYTIME	ZZTP2138M	HAMMERHEAD SHARK	$ 8,023	230	T	T	T	T
PLAYTIME	ZZTP2138MS	HAMMERHEAD SHARK (SM)	$ 8,023	248	T	T	T	T
PLAYTIME	ZZTP2139M	LUMBERJACK HOLLOW TUNNEL CLIMBER	$ 11,181	252.4	T	T	T	T
PLAYTIME	ZZTP2139MS	LUMBERJACK HOLLOW TUNNEL CLIMBER (SM)	$ 11,181	242	T	T	T	T
PLAYTIME	ZZTP2142M	TREE LOG CLIMBER	$ 6,735	192	T	T	T	T
PLAYTIME	ZZTP2142MS	TREE LOG CLIMBER (SM)	$ 6,735	220	T	T	T	T
PLAYTIME	ZZTP2143M	LOG STEPS CLIMBER	$ 10,031	316	T	T	T	T
PLAYTIME	ZZTP2143MS	LOG STEPS CLIMBER (SM)	$ 10,031	347	T	T	T	T
PLAYTIME	ZZTP2154M	BLACK BEAR SLEEPING OVER CLIMBING TUNNEL	$ 13,399	366.8	T	T	T	T
PLAYTIME	ZZTP2154MS	BLACK BEAR SLEEPING OVER CLIMBING TUNNEL (SM)	$ 13,399	356.4	T	T	T	T
PLAYTIME	ZZTP2182M	GORILLA TUNNEL CLIMBER	$ 12,751	280	T	T	T	T
PLAYTIME	ZZTP2182MS	GORILLA TUNNEL CLIMBER (SM)	$ 12,751	288	T	T	T	T
PLAYTIME	ZZTP2443M	PUFFERFISH TUNNEL CLIMBER	$ 8,192	237.7	T	T	T	T
PLAYTIME	ZZTP2443MS	PUFFERFISH TUNNEL CLIMBER (SM)	$ 8,192	238.2	T	T	T	T
Surfacing	ZZXX0038	WEAR MAT (36in x 36in x 1.5in)	$ 240	55.01	F	F	F	F
SkillOther	ZZXX0043	WHIRLIGIG	$ 3,140	148.29	T	T	T	T
SkillOther	ZZXX0044	BING BOING	$ 4,850	275.30	T	T	T	T
Origins	ZZXX0059	RAPTOR ROCK HEAD	$ 1,763	429.01	T	T	T	T
Origins	ZZXX0060	RAPTOR ROCK TAIL	$ 1,763	410.01	T	T	T	T
Origins	ZZXX0061	FOSSIL JAM	$ 1,195	121.01	T	T	T	T
SkillOther	ZZXX0065	SPIN CUP	$ 1,142	57.21	T	T	T	T
SkillOther	ZZXX0065S	SPIN CUP (SURFACE MOUNT)	$ 1,142	43.72	T	T	T	T
Activo	ZZXX0081	REVO	$ 11,324	294.68	T	T	T	T
Activo	ZZXX0081S	REVO (SURF MOUNT)	$ 11,324	258.32	T	T	T	T
Activo	ZZXX0083	ACTIVO - NUCLEO (BALANCE BOARD)	$ 2,108	103.02	T	T	T	T
Activo	ZZXX0084	UNITY RING	$ 8,580	457.20	Y	Y	Y	Y
Activo	ZZXX0084S	UNITY RING (SM)	$ 8,580	417.40	Y	Y	Y	Y
Fitness	ZZXX0089	ENERGI STATION #1 STATIC & DYNAMIC STRETCHES	$ 7,202	418.73	F	F	F	F
Fitness	ZZXX0089S	ENERGI STATION #1 STATIC & DYNAMIC STRETCHES (SURF MOUNT)	$ 7,202	389.60	F	F	F	F
Fitness	ZZXX0090	ENERGI STATION #2 PULLING,BACK ANGLE BAR & HURDLE	$ 6,400	306.79	F	F	F	F
Fitness	ZZXX0090S	ENERGI STATION #2 PULLING,BACK ANGLE BAR & HURDLE (SURF MNT)	$ 6,400	302.95	F	F	F	F
Fitness	ZZXX0091	ENERGI STATION #3 SQUAT, DIP, PUSH-UP & BALANCE EXERCISES	$ 5,100	249.60	F	F	F	F
Fitness	ZZXX0091S	ENERGI STATION #3 SQUAT, DIP, PUSH-UP & BALANCE (SURF MNT)	$ 5,100	227.47	F	F	F	F
Fitness	ZZXX0092	ENERGI STATION #4 POWER & AGILITY STEP EXERCISES	$ 4,838	205.98	F	F	F	F
Fitness	ZZXX0092S	ENERGI STATION #4 POWER & AGILITY STEP (SURF MOUNT)	$ 4,838	171.34	F	F	F	F
Fitness	ZZXX0093	ENERGI STATION #5 CORE, TORSO & BALANCE DISC EXERCISES	$ 5,908	200.83	F	F	F	F
Fitness	ZZXX0093S	ENERGI STATION #5 CORE, TORSO & BALANCE DISC (SURF MOUNT)	$ 5,908	179.89	F	F	F	F
Fitness	ZZXX0117	ENERGI STANDARD WELCOME SIGN	$ 1,889	43.52	F	F	F	F
Fitness	ZZXX0117S	ENERGI STANDARD WELCOME SIGN (SURF MOUNT)	$ 1,889	40.21	F	F	F	F
SkillOther	ZZXX0132	SPINTASTIC	$ 1,125	54.02	T	T	T	T
Origins	ZZXX0135	ORIGINS T-REX HEAD	$ 11,160	2500.00	T	T	T	T
Origins	ZZXX0136	ORIGINS T-REX RIBS	$ 20,362	2750.00	T	T	T	T

Origins	ZZXX0137	ORIGINS T-REX TAIL	$ 8,004	1325.00	T	T	T	T
Origins	ZZXX0138	ORIGINS T-REX HATCHED EGG	$ 6,154	1500.00	T	T	T	T
Origins	ZZXX0139	ORIGINS T-REX HATCHLING EGG	$ 7,141	2860.00	T	T	T	T
FreeStandClimb	ZZXX0148	MOON ROCK	$ 4,772	242.30	T	T	T	T
FreeStandClimb	ZZXX0148S	MOON ROCK (SURF MOUNT)	$ 4,772	221.20	T	T	T	T
SkillOther	ZZXX0149	VAQUERO	$ 7,694	533.00	T	T	T	T
SkillOther	ZZXX0149S	VAQUERO (SURFACE MOUNT)	$ 7,694	464.62	T	T	T	T
SkillOther	ZZXX0150	OVERDRIVE	$ 6,150	330.44	T	T	T	T
SkillOther	ZZXX0151	SPINAMI	$ 6,781	342.66	T	T	T	T
SkillOther	ZZXX0154	LIVE WIRE TENSION KIT	$ 260	5.10	F	F	F	F
Fitness	ZZXX0163	ENERGI (PRIME)- DBL SIDED SIGN WELCOME/CUSTOM SIGN	$ 2,642	43.52	F	F	F	F
Fitness	ZZXX0163S	ENERGI (PRIME)- DBL SIDED SIGN WELCOME/CUSTOM SIGN	$ 2,642	40.21	F	F	F	F
Independent	ZZXX0164	QUATTRO SEE-SAW RETRO-FIT KIT	$ 650	3.10	F	F	F	F
Independent	ZZXX0182	UNITY TEETER TUNNEL	$ 13,150	694.53	T	T	T	T
Independent	ZZXX0182S	UNITY TEETER TUNNEL (SM)	$ 13,150	614.91	T	T	T	T
SkillOther	ZZXX0187	UNITY LARGE OVERHEAD CANOPY	$ 10,784	608.08	T	T	T	T
SkillOther	ZZXX0187S	UNITY LARGE OVERHEAD CANOPY (SM)	$ 10,784	538.89	T	T	T	T
Independent	ZZXX0192	UNITY TEETER TUNNEL - PERF TOP	$ 13,000	718.65	T	T	T	T
Independent	ZZXX0192S	UNITY TEETER TUNNEL - PERF TOP (SM)	$ 13,000	639.03	T	T	T	T
Independent	ZZXX0193	UNITY ROCKR	$ 8,459	498.42	T	T	T	T
Independent	ZZXX0193S	UNITY ROCKR (SM)	$ 8,459	478.12	T	T	T	T
SkillOther	ZZXX0198	UNITY SWING FRAME	$ 7,935	270.4	T	F	T	T
SkillOther	ZZXX0198S	UNITY SWING FRAME (SM)	$ 7,935	217.4	T	F	T	T
SkillOther	ZZXX0200	UNITY SWING ADD-A-BAY	$ 8,273	292.3	T	F	T	T
SkillOther	ZZXX0200S	UNITY SWING ADD-A-BAY (SM)	$ 8,273	252.2	T	F	T	T
SkillOther	ZZXX0203	HOOPLA SWING	$ 1,907	48.5	T	F	T	T
SkillOther	ZZXX0204	BASKET SWING	$ 2,525	83.4	T	T	T	T
SkillOther	ZZXX0341	BALANCE TRAX POND	$ 519	16.80	T	T	T	T
SkillOther	ZZXX0341S	BALANCE TRAX POND (SURF MOUNT)	$ 519	15.70	T	T	T	T
SkillOther	ZZXX0342	BALANCE TRAX MOUNTAIN	$ 2,501	142.91	T	T	T	T
SkillOther	ZZXX0342S	BALANCE TRAX MOUNTAIN (SURF MOUNT)	$ 2,501	148.70	T	T	T	T
SkillOther	ZZXX0343	BALANCE TRAX DUNES	$ 2,325	145.81	T	T	T	T
SkillOther	ZZXX0343S	BALANCE TRAX DUNES (SURF MOUNT)	$ 2,325	152.00	T	T	T	T
SkillOther	ZZXX0344	BALANCE TRAX SNAKE	$ 2,511	164.20	T	T	T	T
SkillOther	ZZXX0344S	BALANCE TRAX SNAKE (SURF MOUNT)	$ 2,511	163.10	T	T	T	T
SkillOther	ZZXX0345	BALANCE TRAX BOOMERANG	$ 1,736	122.40	T	T	T	T
SkillOther	ZZXX0345S	BALANCE TRAX BOOMERANG (SURF MOUNT)	$ 1,736	120.20	T	T	T	T
FreeStandClimb	ZZXX0346	UNITY SLIDE CLIMBER	$ 16,117	892.51	T	T	T	T
FreeStandSlide	ZZXX0346S	UNITY SLIDE CLIMBER (SM)	$ 16,117	888.77	F	F	F	F
Independent	ZZXX0347	UNITY SPINR - W/ 0 ACCESSIBLE SEATS	$ 15,150	861.55	F	T	T	T
Independent	ZZXX0347S	UNITY SPINR - W/ 0 ACCESSIBLE SEATS (SURFACE MOUNT)	$ 15,025	786.94	F	T	T	T
Independent	ZZXX0348	UNITY SPINR - W/ 1 ACCESSIBLE SEAT	$ 15,300	865.81	F	T	T	T
Independent	ZZXX0348S	UNITY SPINR - W/ 1 ACCESSIBLE SEAT (SURFACE MOUNT)	$ 15,300	791.2	F	T	T	T
Independent	ZZXX0349	UNITY SPINR - W/ 2 ACCESSIBLE SEATS	$ 15,637	870.07	F	T	T	T
Independent	ZZXX0349S	UNITY SPINR - W/ 2 ACCESSIBLE SEATS (SURFACE MOUNT)	$ 15,637	795.46	F	T	T	T
Independent	ZZXX0351	UNITY SPINR - TOP COVER	$ 181	9.91	F	T	T	T
SkillOther	ZZXX0355	CRUISE LINE	$ 19,456	957.04	T	T	T	T
SkillOther	ZZXX0358	CRUISE LINE - CABLE REPLACEMENT	$ 2,600	30.6	F	T	T	T
FreeStandClimb	ZZXX0365	HOME DOME	$ 11,127	426.71	T	T	T	T

FreeStandClimb	ZZXX0365S	HOME DOME (SM)	$ 11,127	418.94	T	T	T	T
FreeStandClimb	ZZXX0366	UNITY DOME	$ 21,654	600.17	T	T	T	T
FreeStandClimb	ZZXX0366S	UNITY DOME (SM)	$ 21,654	513.77	T	T	T	T
FreeStandClimb	ZZXX0367	UNITY DOME SENSORY PANELS	$ 5,215	75.22	T	T	T	T
FreeStandClimb	ZZXX0400	SUPER DOME	$ 6,525	357.28	T	T	T	T
FreeStandClimb	ZZXX0401	COSMIC WARP	$ 3,468	250.38	T	T	T	T
RockBlocks	ZZXX0407	ROCKBLOCKS CLIMBING TUNNEL	$ 7,214	320.93	T	T	T	T
RockBlocks	ZZXX0407S	ROCKBLOCKS CLIMBING TUNNEL (SURFACE MOUNT)	$ 7,214	308.15	T	T	T	T
FreeStandClimb	ZZXX0409	PUP TENT CLIMBER	$ 5,707	319.31	T	T	T	T
FreeStandClimb	ZZXX0409S	PUP TENT CLIMBER (SURF MOUNT)	$ 5,707	310.07	T	T	T	T
SandH2O	ZZXX0416	STANDARD E-Z DIGGER	$ 1,775	54.13	T	T	T	T
SandH2O	ZZXX0421	ACCESSIBLE E-Z DIGGER	$ 1,755	49.19	T	T	T	T
FreeStandClimb	ZZXX0430	JUMBLE GYM	$ 7,524	354.00	T	T	T	T
FreeStandClimb	ZZXX0461	OZARK SUMMIT CLIMBER	$ 9,200	454.00	T	T	T	T
FreeStandClimb	ZZXX0461S	OZARK SUMMIT CLIMBER (SURF MOUONT)	$ 9,200	456.70	T	T	T	T
FreeStandClimb	ZZXX0462	SIERRA SUMMIT CLIMBER	$ 7,849	449.00	T	T	T	T
FreeStandClimb	ZZXX0462S	SIERRA SUMMIT CLIMBER (SURF MOUNT)	$ 7,849	420.00	T	T	T	T
FreeStandClimb	ZZXX0463	ROCKIES SUMMIT CLIMBER	$ 13,879	774.00	T	T	T	T
FreeStandClimb	ZZXX0463S	ROCKIES SUMMIT CLIMBER (SURF MOUNT)	$ 13,879	713.20	T	T	T	T
FreeStandClimb	ZZXX0464	APPALACHIAN SUMMIT CLIMBER	$ 19,750	1100.50	T	T	T	T
FreeStandClimb	ZZXX0464S	APPALACHIAN SUMMIT CLIMBER (SURF MOUNT)	$ 19,750	1008.70	T	T	T	T
ThemedPlay	ZZXX0474	PLAYTOWN PLAYGROUND	$ 8,655	447.90	T	T	T	T
ThemedPlay	ZZXX0474S	PLAYTOWN PLAYGROUND (SURF MOUNT)	$ 8,655	394.60	T	T	T	T
ThemedPlay	ZZXX0475	PLAYTOWN MUSIC STORE	$ 6,460	229.60	T	T	T	T
ThemedPlay	ZZXX0475S	PLAYTOWN MUSIC STORE (SM)	$ 6,460	208.70	T	T	T	T
ThemedPlay	ZZXX0476	PLAYTOWN NATURE STATION	$ 5,717	224.74	T	T	T	T
ThemedPlay	ZZXX0476S	PLAYTOWN NATURE STATION (SURF MOUNT)	$ 5,717	193.41	T	T	T	T
ThemedPlay	ZZXX0477	PLAYTOWN GAS STATION	$ 4,466	108.40	T	T	T	T
ThemedPlay	ZZXX0477S	PLAYTOWN GAS STATION (SURF MOUNT)	$ 4,466	87.50	T	T	T	T
ThemedPlay	ZZXX0478	PLAYTOWN TOLL BOOTH	$ 2,267	70.90	T	T	T	T
ThemedPlay	ZZXX0478S	PLAYTOWN TOLL BOOTH (SURF MOUNT)	$ 2,267	55.20	T	T	T	T
ThemedPlay	ZZXX0479	PLAYTOWN FLOWER CLIMBER	$ 1,834	90.90	T	T	T	T
ThemedPlay	ZZXX0479S	PLAYTOWN FLOWER CLIMBER (SURF MOUNT)	$ 1,834	75.20	T	T	T	T
ThemedPlay	ZZXX0480	PLAYTOWN BUTTERFLY CLIMBER	$ 832	39.80	T	T	T	T
ThemedPlay	ZZXX0480S	PLAYTOWN BUTTERFLY CLIMBER (SURF MOUNT)	$ 832	31.90	T	T	T	T
Independent	ZZXX0483	COZY COCOON - SPINNING	$ 4,145	132.00	T	T	T	T
Independent	ZZXX0483S	COZY COCOON - BEARING (SURF MOUNT)	$ 4,145	125.85	T	T	T	T
Fitness	ZZXX0487	THE TWISTER	$ 3,305	90.16	F	F	F	T
Fitness	ZZXX0487S	THE TWISTER (SURF MOUNT)	$ 3,305	85.45	F	F	F	F
Fitness	ZZXX0488	RECUMBENT BIKE	$ 5,095	104.09	F	F	F	F
Fitness	ZZXX0488S	RECUMBENT BIKE (SURF MOUNT)	$ 5,095	101.81	F	F	F	F
Fitness	ZZXX0489	ARM AND SHOULDER CIRCLES	$ 6,725	212.45	F	F	F	F
Fitness	ZZXX0489S	ARM AND SHOULDER CIRCLES (SURF MOUNT)	$ 6,725	205.83	F	F	F	F
Fitness	ZZXX0492	SHOULDER SLIDE	$ 2,566	70.48	F	F	F	F
Fitness	ZZXX0492S	SHOULDER SLIDE (SURF MOUNT)	$ 2,950	80.10	F	F	F	F
Fitness	ZZXX0493	ENERGI STATION #5 CORE, TORSO & BALANCE DISC EXERCISES (EN)	$ 5,940	246.85	F	F	F	T
Fitness	ZZXX0493S	ENERGI STATION #5 CORE, TORSO & BALANCE DISC (SM) (EN)	$ 5,940	225.9	F	F	F	T
SpringRiders	ZZXX0495	SPRING RIDER FOOTER FRAME	$ 262	17.15	T	T	T	T
SpringRiders	ZZXX0496	C - SPRING RIDER FOOTER FRAME	$ 327	19.82	T	T	T	T

Fitness	ZZXX0499	SWITCH GLIDER	$ 4,950	161.57	F	F	F	F
SkillOther	ZZXX0503	SWIRL SAUCER	$ 4,950	187	T	T	T	T
SpringRiders	ZZXX0551	BOAT SPRING RIDER	$ 2,420	83.92	T	T	T	T
SpringRiders	ZZXX0552	BOAT SPRING RIDER WITH SOUND	$ 3,887	86.75	T	T	T	T
SpringRiders	ZZXX0553	PLANE SPRING RIDER	$ 2,420	82.14	T	T	T	T
SpringRiders	ZZXX0554	PLANE SPRING RIDER WITH SOUND	$ 3,887	84.97	T	T	T	T
SpringRiders	ZZXX0555	CAR SPRING RIDER	$ 2,420	84.30	T	T	T	T
SpringRiders	ZZXX0556	CAR SPRING RIDER WITH SOUND	$ 3,909	87.13	T	T	T	T
SpringRiders	ZZXX0557	TRUCK SPRING RIDER	$ 2,420	87.62	T	T	T	T
SpringRiders	ZZXX0558	TRUCK SPRING RIDER WITH SOUND	$ 3,909	90.45	T	T	T	T
SpringRiders	ZZXX0561	COW SPRING RIDER	$ 1,506	49.22	T	T	T	T
SpringRiders	ZZXX0562	COW SPRING RIDER WITH SOUND	$ 2,992	51.78	T	T	T	T
SpringRiders	ZZXX0563	HORSE SPRING RIDER	$ 1,506	50.29	T	T	T	T
SpringRiders	ZZXX0564	HORSE SPRING RIDER WITH SOUND	$ 2,992	52.85	T	T	T	T
SpringRiders	ZZXX0565	LADYBUG SPRING RIDER	$ 1,506	48.84	T	T	T	T
SpringRiders	ZZXX0566	LADYBUG SPRING RIDER WITH SOUND	$ 2,992	51.40	T	T	T	T
SpringRiders	ZZXX0567	BEE SPRING RIDER	$ 1,506	51.48	T	T	T	T
SpringRiders	ZZXX0568	BEE SPRING RIDER WITH SOUND	$ 2,992	54.04	T	T	T	T
SpringRiders	ZZXX0583	SPRING RIDER SIDEWINDER CYCLE	$ 2,249	66.91	T	T	T	T
SpringRiders	ZZXX0584	SPRING RIDER SIDEWINDER CYCLE W/ SIDECAR	$ 3,690	130.04	T	T	T	T
SpringRiders	ZZXX0595	DUO SEE-SAW W/OUT BACKREST	$ 3,829	196.30	T	T	T	T
SpringRiders	ZZXX0596	DUO SEE-SAW WITH BACKREST	$ 4,156	210.02	T	T	T	T
SpringRiders	ZZXX0597	QUATTRO SEE-SAW (w/o SEAT BACKS)	$ 8,246	455.45	T	T	F	T
SpringRiders	ZZXX0598	QUATTRO SEE-SAW (w/ SEAT BACKS)	$ 7,913	482.67	T	T	F	T
SpringRiders	ZZXX0604	2 SEAT SEE-SAW W/ FIXED FULCRUM	$ 2,114	171.04	T	T	T	T
SpringRiders	ZZXX0605	4 SEAT SEE-SAW W/ FIXED FULCRUM	$ 3,811	323.68	T	T	F	F
ActionVehicles	ZZXX0620	FREDDY FIRETRUCK (SPRING MOUNT)	$ 10,570	751.98	T	T	T	T
ActionVehicles	ZZXX0621	FREDDY FIRETRUCK (RIGID MOUNT)	$ 9,620	674.36	T	T	T	T
ActionVehicles	ZZXX0622	BERNIE BUS (SPRING MOUNT)	$ 9,638	656.83	T	T	T	T
ActionVehicles	ZZXX0623	BERNIE BUS (RIGID MOUNT)	$ 8,692	579.21	T	T	T	T
Independent	ZZXX0625	HILL TUNNEL	$ 14,584	580.73	F	F	F	F
FreeStandSlide	ZZXX0630	FREE STANDING SLIDE- NUVO	$ 11,439	900.00	T	T	T	T
SpringRiders	ZZXX0650	WAVE RIDER SEE-SAW	$ 3,150	167.37	T	T	T	T
Independent	ZZXX0651	WELCOME SIGN - AGES 2-5	$ 828	54.2	F	F	F	F
Independent	ZZXX0651S	WELCOME SIGN - AGES 2-5 (SM)	$ 828	43.3	F	F	F	F
Independent	ZZXX0652	WELCOME SIGN - AGES 5-12	$ 828	54.2	F	F	F	F
Independent	ZZXX0652S	WELCOME SIGN - AGES 5-12 (SM)	$ 828	43.3	F	F	F	F
Independent	ZZXX0653	WELCOME SIGN - AGES 2-12	$ 828	54.2	F	F	F	F
Independent	ZZXX0653S	WELCOME SIGN - AGES 2-12 (SM)	$ 828	43.3	F	F	F	F
Independent	ZZXX0654	WELCOME SIGN - FREN CAN/ENGLISH 18MO-5YR	$ 828	54.2	F	F	F	F
Independent	ZZXX0654S	WELCOME SIGN - FREN CAN/ENGLISH 18MO-5YR (SM)	$ 828	43.3	F	F	F	F
Independent	ZZXX0655	WELCOME SIGN - FREN CAN/ENGLISH 18MO-12YR	$ 828	54.2	F	F	F	F
Independent	ZZXX0655S	WELCOME SIGN - FREN CAN/ENGLISH 18MO-12YR (SM)	$ 828	43.3	F	F	F	F
Independent	ZZXX0656	WELCOME SIGN - FREN CAN/ENGLISH 5YR-12YR	$ 828	54.2	F	F	F	F
Independent	ZZXX0656S	WELCOME SIGN - FREN CAN/ENGLISH 5YR-12YR (SM)	$ 828	43.3	F	F	F	F
Independent	ZZXX0657	WELCOME SIGN - CUSTOM	$ 1,626	53.1	F	F	F	F
Independent	ZZXX0657S	WELCOME SIGN - CUSTOM (SM)	$ 1,626	42.4	F	F	F	F
Independent	ZZXX0658	WELCOME SIGN - DOUBLE SIDED CUSTOM	$ 2,005	56.1	F	F	F	F
Independent	ZZXX0658S	WELCOME SIGN - DOUBLE SIDED CUSTOM (SM)	$ 2,005	45.4	F	F	F	F

ThemedPlay	ZZXX0660	CONCERTO SMALL CABASA	$ 1,178	59.63	T	T	T	T
ThemedPlay	ZZXX0660S	CONCERTO SMALL CABASA (SURFACE MOUNT)	$ 1,178	42.87	T	T	T	T
ThemedPlay	ZZXX0661	CONCERTO MEDIUM CABASA	$ 1,318	67.67	T	T	T	T
ThemedPlay	ZZXX0661S	CONCERTO MEDIUM CABASA (SURFACE MOUNT)	$ 1,318	50.91	T	T	T	T
ThemedPlay	ZZXX0662	CONCERTO LARGE CABASA	$ 1,472	78.46	T	T	T	T
ThemedPlay	ZZXX0662S	CONCERTO LARGE CABASA (SURFACE MOUNT)	$ 1,472	61.7	T	T	T	T
ThemedPlay	ZZXX0663	CONCERTO 2 CONGAS	$ 2,154	50.96	T	T	T	T
ThemedPlay	ZZXX0663S	CONCERTO 2 CONGAS (SURFACE MOUNT)	$ 2,154	41.93	T	T	T	T
ThemedPlay	ZZXX0664	CONCERTO 3 CONGAS	$ 2,900	61.44	T	T	T	T
ThemedPlay	ZZXX0664S	CONCERTO 3 CONGAS (SURFACE MOUNT)	$ 2,900	52.41	T	T	T	T
ThemedPlay	ZZXX0665	CONCERTO 5 CONGAS	$ 4,408	78.4	T	T	T	T
ThemedPlay	ZZXX0665S	CONCERTO 5 CONGAS (SURFACE MOUNT)	$ 4,408	69.37	T	T	T	T
ThemedPlay	ZZXX0666	CONCERTO VIBES	$ 5,929	134.82	T	F	F	T
ThemedPlay	ZZXX0666S	CONCERTO VIBES (SURFACE MOUNT)	$ 5,929	112.45	T	F	F	T
ThemedPlay	ZZXX0667	CONCERTO CHIMES	$ 5,945	129.32	T	F	F	T
ThemedPlay	ZZXX0667S	CONCERTO CHIMES (SURFACE MOUNT)	$ 5,945	119.37	T	F	F	T
Independent	ZZXX0670	WELCOME SIGN - SPANISH 2-5YR	$ 828	54.2	F	F	F	F
Independent	ZZXX0670S	WELCOME SIGN - SPANISH 2-5YR (SM)	$ 828	43.3	F	F	F	F
Independent	ZZXX0671	WELCOME SIGN - SPANISH 2-12YR	$ 828	54.2	F	F	F	F
Independent	ZZXX0671S	WELCOME SIGN - SPANISH 2-12YR (SM)	$ 828	43.3	F	F	F	F
Independent	ZZXX0672	WELCOME SIGN - SPANISH 5-12YR	$ 828	54.2	F	F	F	F
Independent	ZZXX0672S	WELCOME SIGN - SPANISH 5-12YR (SM)	$ 828	43.3	F	F	F	F
SculpturePlay	ZZXX0691	FATHER SHEET PLASTIC PANEL	$ 5,663	35.58	T	T	T	T
SculpturePlay	ZZXX0692	FATHER LAMINATED BAMBOO PANEL	$ 5,663	25.42	T	T	T	T
SculpturePlay	ZZXX0693	FATHER POLYCARBONATE PANEL	$ 5,663	29.74	T	T	T	T
SculpturePlay	ZZXX0694	MOTHER SHEET PLASTIC PANEL	$ 6,344	35.88	T	T	T	T
SculpturePlay	ZZXX0695	MOTHER LAMINATED BAMBOO PANEL	$ 6,344	25.86	T	T	T	T
SculpturePlay	ZZXX0696	MOTHER POLYCARBONATE PANEL	$ 6,344	30.13	T	T	T	T
SculpturePlay	ZZXX0697	DAUGHTER SHEEET PLASTIC PANEL	$ 1,703	6.14	T	T	T	T
SculpturePlay	ZZXX0698	DAUGHTER LAMINATED BAMBOO PANEL	$ 1,703	4.43	T	T	T	T
SculpturePlay	ZZXX0699	DAUGHTER POLYCARBONATE PANEL	$ 1,703	5.14	T	T	T	T
SculpturePlay	ZZXX0701	PLAYFORM 7 FATHER	$ 36,839	1083.25	T	T	T	T
SculpturePlay	ZZXX0701S	PLAYFORM 7 FATHER (SM)	$ 36,839	827.87	T	T	T	T
SculpturePlay	ZZXX0702	PLAYFORM 7 MOTHER	$ 26,906	618.1	T	T	T	T
SculpturePlay	ZZXX0702S	PLAYFORM 7 MOTHER (SM)	$ 26,906	547	T	T	T	T
SculpturePlay	ZZXX0703	PLAYFORM 7 SON	$ 15,299	283.74	T	T	T	T
SculpturePlay	ZZXX0703S	PLAYFORM 7 SON (SM)	$ 15,299	242.73	T	T	T	T
SculpturePlay	ZZXX0704	PLAYFORM 7 DAUGHTER	$ 13,514	260.28	T	T	T	T
SculpturePlay	ZZXX0704S	PLAYFORM 7 DAUGHTER (SM)	$ 13,514	219.27	T	T	T	T
SculpturePlay	ZZXX0705	FATHER TO MOTHER BELTS AND HANDLE	$ 8,495	180.57	T	T	T	T
SculpturePlay	ZZXX0706	FATHER TO DAUGHTER BELT AND HANDLE	$ 3,894	48.17	T	T	T	T
SculpturePlay	ZZXX0707	MOTHER TO SON BELT AND HANDLE	$ 2,048	66.34	T	T	T	T
SculpturePlay	ZZXX0708	SON SHEET PLASTIC PANEL	$ 5,973	37.95	T	T	T	T
SculpturePlay	ZZXX0709	SON LAMINATED BAMBOO PANEL	$ 5,973	27.04	T	T	T	T
SculpturePlay	ZZXX0713	SON POLYCARBONATE PANEL	$ 5,973	31.69	T	T	T	T
SculpturePlay	ZZXX0714	PLAYFORM 7 FATHER (EN VERSION)	$ 37,200	1075.2	F	T	F	T
SculpturePlay	ZZXX0714S	PLAYFORM 7 FATHER (EN VERSION) (SM)	$ 37,200	819.9	F	T	F	T
SpringRiders	ZZXX0717	REPLACEMENT SPRING RIDER SPRING - FOR OLD SPRING RIDERS	$ 815	32.92	F	F	F	F
SpringRiders	ZZXX0718	REPLACEMENT SPRING ASSY FOR (OLD) SPRINGMATE WITH FOOTREST	$ 913	0.00	F	F	F	F

SpringRiders	ZZXX0719	REPLACEMENT SPRING ASSY FOR (OLD) SPRINGMATE WITHOUT FOOTREST	$ 815	31.50	F	F	F	F
SpringRiders	ZZXX0721	DUCK WITH COIL SPRING	$ 1,702	63.41	T	T	T	F
SpringRiders	ZZXX0725	PONY WITH COIL SPRING	$ 1,785	70.05	T	T	T	F
SpringRiders	ZZXX0737	CHIPMUNK WITH COIL SPRING	$ 1,730	67.67	T	T	T	F
SpringRiders	ZZXX0741	TURTLE WITH COIL SPRING	$ 1,706	64.51	T	T	T	F
Shade	ZZXX0810	14FT SHADE HYPAR	$ 4,139	279.59	T	T	T	T
CustomPlaygrnd	ZZXX0843	RISK MANAGEMENT SIGN	$ 386	30.42	F	F	F	F
CustomPlaygrnd	ZZXX0845	RISK MANAGEMENT SIGN (SM)	$ 392	30.6	F	F	F	F
ThemedPlay	ZZXX0880	COMMUNITY HELPERS W/ TUNNEL	$ 21,149	1703.1	T	T	T	T
ThemedPlay	ZZXX0880S	COMMUNITY HELPERS W/ TUNNEL (SM)	$ 21,149	1638.3	T	T	T	T
ThemedPlay	ZZXX0881	TRUCK	$ 4,914	268.3	T	T	T	T
ThemedPlay	ZZXX0881S	TRUCK (SM)	$ 4,914	240.6	T	T	T	T
ThemedPlay	ZZXX0882	PLAYHOUSE	$ 13,125	858.2	T	T	T	T
ThemedPlay	ZZXX0882S	PLAYHOUSE (SM)	$ 13,125	813.6	T	T	T	T
ThemedPlay	ZZXX0883	GARDEN CRAWL TUNNEL	$ 2,947	254.6	T	T	T	T
ThemedPlay	ZZXX0883S	GARDEN CRAWL TUNNEL (SM)	$ 2,947	251.7	T	T	T	T
ThemedPlay	ZZXX0884	GARDEN SENSORY WALL FOR 2 INSERTS	$ 1,929	156.9	T	T	T	T
ThemedPlay	ZZXX0884S	GARDEN SENSORY WALL FOR 2 INSERTS (SM)	$ 1,929	111.8	T	T	T	T
ThemedPlay	ZZXX0885	SILLY TREE	$ 13,461	853.3	T	T	T	T
ThemedPlay	ZZXX0885S	SILLY TREE (SM)	$ 13,461	765	T	T	T	T
ThemedPlay	ZZXX0886	TRAFFIC LIGHT	$ 1,425	53.5	T	T	T	T
ThemedPlay	ZZXX0886S	TRAFFIC LIGHT (SM)	$ 1,425	37.5	T	T	T	T
ThemedPlay	ZZXX0887	CHATTERY	$ 7,691	587.5	T	T	T	T
ThemedPlay	ZZXX0887S	CHATTERY (SM)	$ 7,691	541.8	T	T	T	T
ThemedPlay	ZZXX0888	GARDEN SENSORY WALL FOR 1 INSERT	$ 1,921	165.6	T	T	T	T
ThemedPlay	ZZXX0888S	GARDEN SENSORY WALL FOR 1 INSERT (SM)	$ 1,921	120.4	T	T	T	T
ThemedPlay	ZZXX0889	COMMUNITY HELPERS W/ OUT TUNNEL	$ 20,608	1516.5	T	T	T	T
ThemedPlay	ZZXX0889S	COMMUNITY HELPERS W/ OUT TUNNEL (SM)	$ 20,608	1451.1	T	T	T	T
Fitness	ZZXX0901	PLAYWORLD EMBLEM CASTING FOR 3.5in OD TUBING	$ 120	0.87	F	F	F	F
SkillOther	ZZXX0911	CONE SPINNER W/ FLOOR	$ 16,143	366.1	T	T	T	T
SkillOther	ZZXX0912	CONE SPINNER	$ 13,398	204.4	T	T	T	T
SkillOther	ZZXX0913	CONE SPINNER DIAMOND	$ 17,461	258.8	T	T	T	T
SkillOther	ZZXX0914	CONE SPINNER DOUBLE DECKER	$ 23,163	521.1	T	T	T	T
RopeScapes	ZZXX0971	NAICA 2.0V	$ 29,120	1343.4	T	T	T	T
RopeScapes	ZZXX0971SD	NAICA 2.0V (4IN SM)	$ 29,370	1332.1	T	T	T	T
RopeScapes	ZZXX0972	NAICA 6.0V	$ 50,440	2374.5	T	T	T	T
RopeScapes	ZZXX0972SD	NAICA 6.0V (4IN SM)	$ 50,690	2359.4	T	T	T	T
RopeScapes	ZZXX0973	NAICA 4.0R	$ 34,216	1476.5	T	T	T	T
RopeScapes	ZZXX0973SD	NAICA 4.0R (4IN SM)	$ 34,466	1410	T	T	T	T
RopeScapes	ZZXX0974	NAICA 8.0RV	$ 71,656	3121.4	T	T	T	T
RopeScapes	ZZXX0974SD	NAICA 8.0RV (4IN SM)	$ 71,906	3043.6	T	T	T	T
RopeScapes	ZZXX0980	CHROMA WHEEL - NAICA ONLY	$ 5,720	183.6	T	T	T	T
RopeScapes	ZZXX0980SD	CHROMA WHEEL - NAICA ONLY (4IN SM)	$ 5,970	167	T	T	T	T
RopeScapes	ZZXX0981	RAPPEL POLE	$ 936	88.8	T	T	T	T
RopeScapes	ZZXX0981SD	RAPPEL POLE (4IN SM)	$ 1,186	89.2	T	T	T	T
RopeScapes	ZZXX0982	STAINLESS STEEL SLIDE - NET ENTRY	$ 9,880	435.7	T	T	T	T
RopeScapes	ZZXX0982SD	STAINLESS STEEL SLIDE - NET ENTRY (4IN SM)	$ 10,130	423.8	T	T	T	T
RopeScapes	ZZXX0983	AERIAL GRID NET	$ 5,824	220.5	T	T	T	T
RopeScapes	ZZXX0984	BASE CAMP	$ 9,256	278.8	T	T	T	T

RopeScapes	ZZXX0984SD	BASE CAMP (4IN SM)	$ 9,506	277.6	T	T	T	T
RopeScapes	ZZXX0985	SLITHER SLIDE ENTRANCE/EXIT - NET ENTRY	$ 6,942	325.5	T	T	T	T
RopeScapes	ZZXX0985SD	SLITHER SLIDE ENTRANCE/EXIT - NET ENTRY (4IN SM)	$ 7,192	320.8	T	T	T	T
Electronics	ZZXX0994	NEOS 360 - ADA VERSION	$ 43,544	813.18	T	T	T	T
Electronics	ZZXX0995	NEOS 360	$ 43,756	813.18	T	T	T	T
Electronics	ZZXX0997	NEOS ARC	$ 40,382	608.51	T	T	T	T
Electronics	ZZXX1000	NEOS	$ 67,638	1407.53	T	T	T	T
Electronics	ZZXX1002	NEOS 3-YEAR EXTENDED PARTS WARRANTY	$ 1,452	0.01	F	F	F	F
Electronics	ZZXX1007	NEOS WALL FOR INDOOR USE	$ 64,959	964.46	F	F	F	F
Fitness	ZZXX1020	CURVED BALANCE BEAM	$ 837	62.01	T	T	T	T
CustomPlaygrnd	ZZXX1025	NEOS- CUSTOM INTERFACE BACK PANEL SIGN	$ 1,506	8.04	F	F	F	F
SkillOther	ZZXX1030	PLAYHILLS ALPINE TRAIL	$ 18,800	1021.7	T	T	T	T
SkillOther	ZZXX1030SD	PLAYHILLS ALPINE TRAIL (4IN SM)	$ 19,050	1007.1	T	T	T	T
SkillOther	ZZXX1031	PLAYHILLS AGILITY TRAIL	$ 15,150	1030	T	T	T	T
SkillOther	ZZXX1031SD	PLAYHILLS AGILITY TRAIL (4IN SM)	$ 15,400	1018.2	T	T	T	T
SkillOther	ZZXX1032	PLAYHILLS RAIL TRAIL	$ 14,750	1133.1	T	T	T	T
SkillOther	ZZXX1032SD	PLAYHILLS RAIL TRAIL (4IN SM)	$ 15,000	1106.8	T	T	T	T
SkillOther	ZZXX1035	PLAYHILLS DUO HUB	$ 5,400	221	T	T	T	T
SkillOther	ZZXX1035SD	PLAYHILLS DUO HUB (4IN SM)	$ 5,650	232.7	T	T	T	T
SkillOther	ZZXX1036	PLAYHILLS TRI HUB	$ 7,132	467.5	T	T	T	T
SkillOther	ZZXX1036SD	PLAYHILLS TRI HUB (4IN SM)	$ 7,382	485.1	T	T	T	T
SkillOther	ZZXX1050	TOSS-UP	$ 1,059	109.32	T	T	T	T
SkillOther	ZZXX1051	TRIPLE SHOOTOUT	$ 3,752	308.85	T	T	T	T
FreeStandClimb	ZZXX1053	DENALI 2M NET	$ 17,532	309.82	T	T	F	T
FreeStandClimb	ZZXX1054	DENALI 4M NET	$ 21,818	440.82	T	T	T	T
FreeStandClimb	ZZXX1055	DENALI 4M CSA NET	$ 28,442	467.57	F	F	T	F
FreeStandClimb	ZZXX1056	DENALI 4M TWIN NET	$ 41,097	794.58	T	T	F	T
FreeStandClimb	ZZXX1057	DENALI 6M NET	$ 29,269	548.09	T	T	F	T
FreeStandClimb	ZZXX1058	DENALI 6M TWIN NET	$ 56,799	1024.72	T	T	F	T
SkillOther	ZZXX1079	TETHERBALL POST W/ BALL	$ 315	31.98	F	F	F	F
SkillOther	ZZXX1080	TETHERBALL ONLY	$ 65	1.04	F	F	F	F
FreeStandClimb	ZZXX1114S	UNITY WEB - MEDIUM	$ 22,746	798.07	T	T	T	T
FreeStandClimb	ZZXX1115S	UNITY WEB - SMALL	$ 17,592	614.17	T	T	T	T
FreeStandClimb	ZZXX1116	UNITY WEB FOOTING KIT - MEDIUM	$ 1,278	129.54	T	T	T	T
FreeStandClimb	ZZXX1117	UNITY WEB FOOTING KIT - SMALL	$ 1,278	124.89	T	T	T	T
RopeScapes	ZZXX1123	QUITO - 4IN SURFACING	$ 78,233	4326.30	T	T	T	F
RopeScapes	ZZXX1124	QUITO - 12IN SURFACING	$ 78,233	4392.40	T	T	T	F
SkillOther	ZZXX1125	MIGHTY DESCENT TO QUITO/ORIGAMI	$ 11,754	765.10	T	T	T	T
SkillOther	ZZXX1125SD	MIGHTY DESCENT TO QUITO/ORIGAMI (4IN SM)	$ 12,004	794.30	T	T	T	T
SkillOther	ZZXX1136	ZOOMTRAX W/ DISC SEAT	$ 12,675	1242.86	T	T	T	T
SkillOther	ZZXX1136S	ZOOMTRAX W/ DISC SEAT (SM)	$ 12,678	1176.5	T	T	T	T
SkillOther	ZZXX1137	ZOOMTRAX ADD-A-BAY W/ DISC SEAT	$ 11,406	973.47	T	T	T	T
SkillOther	ZZXX1137S	ZOOMTRAX ADD-A-BAY W/ DISC SEAT (SM)	$ 11,407	91.56	T	T	T	T
SkillOther	ZZXX1138	ZOOMTRAX W/ ACCESSIBLE SEAT	$ 13,475	1061.04	T	T	T	F
SkillOther	ZZXX1138S	ZOOMTRAX W/ ACCESSIBLE SEAT (SM)	$ 13,472	1012.14	T	T	T	F
SkillOther	ZZXX1139	ZOOMTRAX ADD-A-BAY W/ ACCESSIBLE SEAT	$ 12,010	791.65	T	T	T	F
SkillOther	ZZXX1139S	ZOOMTRAX ADD-A-BAY W/ ACCESSIBLE SEAT (SM)	$ 12,012	767.2	T	T	T	F
SkillOther	ZZXX1145	LIVE WIRE	$ 23,900	1702.05	T	T	T	T
SkillOther	ZZXX1145S	LIVE WIRE (SM)	$ 22,119	1449.70	T	T	T	T

SkillOther	ZZXX1153	WHIRL-A-ROUND	$ 7,250	440.36	F	T	T	F
SkillOther	ZZXX1153S	WHIRL-A-ROUND (SURFACE MOUNT)	$ 7,250	365.29	F	T	T	F
SkillOther	ZZXX1154	WHIRL-A-ROUND W/ COVERED UNDERCARRIAGE	$ 9,648	523.35	F	T	T	T
SkillOther	ZZXX1154S	WHIRL-A-ROUND W/ COVERED UNDERCARRIAGE (SURFACE MOUNT)	$ 9,648	449.18	F	T	T	T
Independent	ZZXX1158	ACCESSIBLE WHIRL	$ 15,845	994.24	T	T	T	T
Independent	ZZXX1158S	ACCESSIBLE WHIRL (SURFACE MOUNT)	$ 15,845	800.82	T	T	T	T
SkillOther	ZZXX1266S	GAGA PIT ENTRANCE ASSEMBLY SM	$ 380	19.4	F	F	F	F
SkillOther	ZZXX1267	GAGA PIT ENTRANCE ASSEMBLY	$ 87	11.2	F	F	F	F
SkillOther	ZZXX1268S	GAGA PIT WALL ASSEMBLY SM	$ 400	25.5	F	F	F	F
SkillOther	ZZXX1269	GAGA PIT WALL ASSEMBLY	$ 107	17.3	F	F	F	F
SandH2O	ZZXX1270	2 BASIN ACCESSIBLE SAND & WATER TABLE	$ 2,850	163.01	T	T	T	T
SandH2O	ZZXX1270S	2 BASIN ACCESSIBLE SAND & WATER TABLE (SURFACE MOUNT)	$ 2,850	163.52	T	T	T	T
SandH2O	ZZXX1275	2 BASIN ACCESSIBLE SAND & WATER TABLE w/ROOFS	$ 4,750	292.80	T	T	T	T
SandH2O	ZZXX1275S	2 BASIN ACCESSIBLE SAND & WATER TABLE w/ROOFS (SM)	$ 4,750	292.80	T	T	T	T
TimberStacks	ZZXX1320	TIMBER STACKS - EUGENE	$ 9,299	797.5	T	F	T	F
TimberStacks	ZZXX1321	TIMBER STACKS - ALBANY	$ 12,456	1815	T	T	T	F
TimberStacks	ZZXX1322	TIMBER STACKS - MACON	$ 19,459	2964.5	T	F	T	F
TimberStacks	ZZXX1323	TIMBER STACKS - SPOKANE	$ 26,477	2904	T	F	T	F
TimberStacks	ZZXX1324	TIMBER STACKS - SALEM	$ 41,644	3685	T	F	T	F
TimberStacks	ZZXX1325	TIMBER STACKS - LONGVIEW	$ 47,720	4537.5	T	F	T	F
TimberStacks	ZZXX1326	TIMBER STACKS - MOUNT VERNON	$ 41,644	3993	T	F	T	F
TimberStacks	ZZXX1327	TIMBER STACKS - OLYMPIA	$ 87,917	9075	T	F	T	F
ThemedPlay	ZZXX3150	PLAYEXPRESS ENGINE	$ 12,688	772.60	T	T	T	T
ThemedPlay	ZZXX3150S	PLAYEXPRESS ENGINE (SURFACE MOUNT)	$ 12,688	772.10	T	T	T	T
ThemedPlay	ZZXX3170	DINING CAR	$ 5,187	320.38	T	T	T	T
ThemedPlay	ZZXX3170S	DINING CAR (SURFACE MOUNT)	$ 5,187	310.38	T	T	T	T
ThemedPlay	ZZXX3180	SANDBOX CAR	$ 6,362	457.79	T	T	T	T
ThemedPlay	ZZXX3180S	SANDBOX CAR (SURFACE MOUNT)	$ 6,362	381.11	T	T	T	T
ThemedPlay	ZZXX3195	TANKER CAR	$ 6,001	368.04	T	T	T	F
ThemedPlay	ZZXX3195S	TANKER CAR (SURF MNT)	$ 6,001	362.84	T	T	T	F
ThemedPlay	ZZXX3230	PLAYDOZER	$ 10,828	520.18	T	T	T	T
ThemedPlay	ZZXX3230S	PLAYDOZER (SURFACE MOUNT)	$ 10,828	515.13	T	T	T	T
Surfacing	ZZXX8905	WHEELCHAIR ACCESS BORDER TIMBER	$ 1,955	213.68	F	F	F	F
Surfacing	ZZXX9409	1ft BORDER TIMBER w/STAKE	$ 55	5.51	F	F	F	F
Surfacing	ZZXX9410	2ft BORDER TIMBERS w/STAKE	$ 65	7.61	F	F	F	F
CustomPlaygrnd	ZZXX9426	1/4in RIVNUT TOOL	$ 104	0.3	F	F	F	F
CustomPlaygrnd	ZZXX9427	3/8in RIVNUT TOOL	$ 104	0.3	F	F	F	F
Surfacing	ZZXX9430	4ft BORDER TIMBERS w/STAKE	$ 83	10.31	F	F	F	F
Surfacing	ZZXX9450	BORDER TIMBER END w/STAKE	$ 55	4.19	F	F	F	F

Category	Part Number	DESCRIPTION	List Price ($ USD)	Weight (lbs)	ASTM Certified	CPSC Compliant	CSA Certified	EN Certified
Challenger	ZZCH0007	3.5in OD x 100in STEELPOST W/ RIVETED CAP	$ 236	31.61	T	T	T	T
Challenger	ZZCH0007S	3.5in OD x 64in STEELPOST W/CAP (SURFACE MOUNT)	$ 236	31.01	T	T	T	T
Challenger	ZZCH0009	3.5in OD x 112in STEELPOST W/RIVETED CAP	$ 273	35.40	T	T	T	T
Challenger	ZZCH0009GZ	3.5in OD x 112in GROUNDZERO POST	$ 273	35.11	T	T	T	T
Challenger	ZZCH0009S	3.5in OD x 76in STEEL POSTW/CAP (SURFACE MOUNT)	$ 273	35.11	T	T	T	T
Challenger	ZZCH0018	3.5in OD x 124in STEELPOST W/RIVETED CAP	$ 283	38.91	T	T	T	T
Challenger	ZZCH0018S	3.5in OD x 88in STEELW/CAP (SURFACE MOUNT)	$ 295	39.01	T	T	T	T
Challenger	ZZCH0019	3.5in OD x 124in STEELPOST W/O CAP	$ 218	38.21	T	T	T	T
Challenger	ZZCH0019S	3.5in OD x 88in STEELW/O CAP (SURFACE MOUNT)	$ 218	38.61	T	T	T	T
Challenger	ZZCH0028	3.5in OD x 136in STEELPOST W/ RIVETED CAP	$ 301	43.51	T	T	T	T
Challenger	ZZCH0028S	3.5in OD x 100in STEELPOST W/ CAP (SURFACE MOUNT)	$ 301	31.81	T	T	T	T
Challenger	ZZCH0029	3.5in OD x 136in STEELPOST W/O CAP	$ 259	42.41	T	T	T	T
Challenger	ZZCH0029S	3.5in OD x 100in STEELPOST W/O CAP (SURFACE MOUNT)	$ 259	42.51	T	T	T	T
Challenger	ZZCH0038	3.5in OD x 148in STEELPOST W/ RIVETED CAP	$ 317	47.11	T	T	T	T
Challenger	ZZCH0038GZ	3.5in OD x 148in GROUNDZERO POST	$ 317	47.01	T	T	T	T
Challenger	ZZCH0038S	3.5in OD x 112in STEEL POSTW/ CAP (SURFACE MOUNT)	$ 317	46.11	T	T	T	T
Challenger	ZZCH0039	3.5in OD x 148in STEEL POSTW/O CAP	$ 251	46.21	T	T	T	T
Challenger	ZZCH0039GZ	3.5in x 148in GROUND ZERO POSTNO CAP	$ 251	46.87	F	F	F	F
Challenger	ZZCH0039S	3.5in OD x 112in STEELW/O CAP (SURFACE MOUNT)	$ 251	45.71	T	T	T	T
Challenger	ZZCH0048	3.5in OD x 160in STEEL POSTW/ RIVETED CAP	$ 334	50.21	T	T	T	T
Challenger	ZZCH0048GZ	3.5in x 160in GROUND ZERO POSTNO CAP	$ 338	50.72	T	T	T	T
Challenger	ZZCH0048S	3.5in OD x 124in STEEL POSTW/ CAP (SURFACE MOUNT)	$ 334	50.61	T	T	T	T
Challenger	ZZCH0049	3.5in OD x 160in STEEL POSTW/O CAP	$ 262	49.91	T	T	T	T
Challenger	ZZCH0049GZ	3.5in OD x 160in STEEL POSTW/O CAP (GROUND ZERO)	$ 269	51.16	T	T	T	T
Challenger	ZZCH0049S	3.5in OD x 124in STEELPOST W/O CAP (SURFACE MOUNT)	$ 262	50.21	T	T	T	T
Challenger	ZZCH0058	3.5in OD x 172in STEELPOST W/RIVETED CAP	$ 349	52.01	T	T	T	T
Challenger	ZZCH0058GZ	3.5in OD x 172inGROUND ZERO POST W/CAP	$ 349	56.01	T	T	T	T
Challenger	ZZCH0058S	3.5in OD x 136in STEELPOST W/CAP (SURFACE MOUNT)	$ 349	54.81	T	T	T	T
Challenger	ZZCH0059	3.5in OD x 172in STEEL POSTW/O CAP	$ 279	51.61	T	T	T	T
Challenger	ZZCH0059GZ	3.5in OD x 172inGROUND ZERO POST W/O CAP	$ 279	55.01	T	T	T	T
Challenger	ZZCH0059S	3.5in OD x 136in POSTW/O CAP (SURFACE MOUNT)	$ 279	54.31	T	T	T	T
Challenger	ZZCH0068	3.5in OD x 184in STEEL POSTPOST W/RIVETED CAP	$ 371	57.11	T	T	T	T
Challenger	ZZCH0068GZ	3.5in x 184in GROUNDZERO POST	$ 371	58.75	T	T	T	T
Challenger	ZZCH0068S	3.5in OD x 148in STEELPOST W/CAP (SURFACE MOUNT)	$ 371	58.51	T	T	T	T
Challenger	ZZCH0069	3.5in OD x 184in STEELPOST W/O CAP	$ 295	56.71	T	T	T	T
Challenger	ZZCH0069S	3.5in OD x 148in STEELPOST W/O CAP (SURFACE MOUNT)	$ 295	58.11	T	T	T	T
Challenger	ZZCH0076	3.5in OD x 200in STEELPOST W/RIVETED CAP	$ 388	61.01	T	T	T	T
Challenger	ZZCH0076S	3.5in OD x 166in STEELPOST W/CAP (SURFACE MOUNT)	$ 388	61.51	T	T	T	T
Challenger	ZZCH0077	3.5in OD x 200in STEELPOST W/O CAP	$ 390	61.01	T	T	T	T
Challenger	ZZCH0077S	3.5in OD x 166in STEELPOST W/O CAP (SURFACE MOUNT)	$ 390	63.81	T	T	T	T
Challenger	ZZCH0137	3.5in OD x 100in STEELPOST W/O CAP	$ 164	30.71	T	T	T	T
Challenger	ZZCH0137S	3.5in OD x 64in STEELPOST W/O CAP (SURFACE MOUNT)	$ 164	30.61	T	T	T	T
Challenger	ZZCH0139	3.5in OD x 112in STEELPOST W/O CAP	$ 235	34.81	T	T	T	T
Challenger	ZZCH0139S	3.5in OD x 76in STEELPOST W/O CAP (SURFACE MOUNT)	$ 235	34.71	T	T	T	T
Challenger	ZZCH0149	STEP AROUND	$ 312	6.69	T	T	T	F
Challenger	ZZCH0206	3.5in OD x 96in SWAGEDSTEEL POST	$ 164	31.61	T	T	T	T
Challenger	ZZCH0206S	3.5in OD x 60in SWAGEDSTEEL POST (SURFACE MOUNT)	$ 164	31.01	T	T	T	T
Challenger	ZZCH0207	3.5in OD x 108in SWAGEDSTEEL POST	$ 207	35.41	T	T	T	T
Challenger	ZZCH0207S	3.5in OD x 72in SWAGEDSTEEL POST (SURFACE MOUNT)	$ 207	35.11	T	T	T	T
Challenger	ZZCH0208	3.5in OD x 120in SWAGEDSTEEL POST	$ 225	38.91	T	T	T	T
Challenger	ZZCH0208S	3.5in OD x 84in SWAGEDSTEEL POST (SURFACE MOUNT)	$ 225	50.51	T	T	T	T
Challenger	ZZCH0209	3.5in OD x 132in SWAGEDSTEEL POST	$ 264	65.71	T	T	T	T
Challenger	ZZCH0209S	3.5in OD x 96in SWAGEDSTEEL POST (SURFACE MOUNT)	$ 264	55.71	T	T	T	T
Challenger	ZZCH0216	3.5in OD x 144in SWAGEDSTEEL POST	$ 282	76.41	T	T	T	T
Challenger	ZZCH0216S	3.5in OD x 108in SWAGEDSTEEL POST (SURFACE MOUNT)	$ 282	63.91	T	T	T	T
Challenger	ZZCH0217	3.5in OD x 156in SWAGEDSTEEL POST	$ 273	78.81	T	T	T	T
Challenger	ZZCH0217S	3.5in OD x 120in SWAGEDSTEEL POST (SURFACE MOUNT)	$ 273	71.01	T	T	T	T
Challenger	ZZCH0237	3.5in OD x 168in SWAGEDSTEEL POST	$ 283	51.61	T	T	T	T
Challenger	ZZCH0237GZ	3.5in OD x 168in SWAGEDSTEEL GROUND ZERO POST	$ 283	53.61	T	T	T	T
Challenger	ZZCH0237S	3.5in OD x 132in SWAGEDSTEEL POST (SURFACE MOUNT)	$ 283	45.41	T	T	T	T
Challenger	ZZCH0239	3.5in OD x 180in SWAGEDSTEEL POST	$ 301	59.71	T	T	T	T
Challenger	ZZCH0239S	3.5in OD x 144in SWAGEDSTEEL POST (SURFACE MOUNT)	$ 301	47.41	T	T	T	T
Challenger	ZZCH0246	3.5in OD x 196in SWAGEDSTEEL POST	$ 355	64.71	T	T	T	T
Challenger	ZZCH0246S	3.5in OD x 160in SWAGEDSTEEL POST (SURFACE MOUNT)	$ 355	53.51	T	T	T	T
Challenger	ZZCH0256	3.5in OD x 212in STEELPOST W/CAP	$ 479	62.01	T	T	T	T
Challenger	ZZCH0256S	3.5in OD x 176in STEELPOST W/CAP (SURFACE MOUNT)	$ 479	61.51	T	T	T	T
Challenger	ZZCH0257	3.5in OD x 212in STEELPOST W/O CAP	$ 367	61.01	T	T	T	T
Challenger	ZZCH0257S	3.5in OD x 176in STEELPOST W/O CAP (SURFACE MOUNT)	$ 367	60.51	T	T	T	T
Challenger	ZZCH0258	3.5in OD x 224in STEELPOST W/CAP	$ 517	65.51	T	T	T	T
Challenger	ZZCH0258S	3.5in OD x 188in STEELPOST W/CAP (SURFACE MOUNT)	$ 517	65.01	T	T	T	T
Challenger	ZZCH0259	3.5in OD x 224in STEELPOST W/O CAP	$ 440	64.51	T	T	T	T
Challenger	ZZCH0259S	3.5in OD x 188in STEELPOST W/O CAP (SURFACE MOUNT)	$ 440	64.01	T	T	T	T
Challenger	ZZCH0276	3.5in OD x 208in SWAGEDSTEEL POST	$ 371	61.01	T	T	T	T
Challenger	ZZCH0276S	3.5in OD x 172in SWAGEDSTEEL POST (SURFACE MOUNT)	$ 371	60.51	T	T	T	T
Challenger	ZZCH0278	1ft SWAGED POST EXTENSION	$ 94	7.98	T	T	T	T
Challenger	ZZCH0279	2ft SWAGED POST EXTENSION	$ 109	12.81	T	T	T	T
Challenger	ZZCH0286	3ft SWAGED POST EXTENSION	$ 120	17.54	T	T	T	T
Challenger	ZZCH0288	3.5in OD x 222in SWAGEDSTEEL POST	$ 410	70.08	T	F	T	T
Challenger	ZZCH0288S	3.5in OD x 186in SWAGED STEELSURFACE MOUNT POST	$ 410	70.19	T	T	T	T
Challenger	ZZCH0289	3.5 in OD x 234in SWAGEDSTEEL POST	$ 455	73.93	T	T	T	T
Challenger	ZZCH0289S	3.5in OD x 198in SWAGEDSTEEL SURFACE MOUNT POST	$ 455	74.04	T	T	T	T
Challenger	ZZCH0296	POST W/ LADDER CLIMBER(12in OR 24in DECK)	$ 601	46.21	T	T	T	T
Challenger	ZZCH0296S	POST W/ LADDER CLIMBER(12in OR 24in DECK) (SM)	$ 601	42.91	T	T	T	T
Challenger	ZZCH0297	POST W/ LADDER CLIMBER(36in OR 48in DECK)	$ 688	52.81	T	T	T	T
Challenger	ZZCH0297S	POST W/ LADDER CLIMBER(36in OR 48in DECK) (SM)	$ 688	50.06	T	T	T	T
Challenger	ZZCH0306	LOLLITOP SUPPORT POST 72inDECK	$ 819	70.83	T	T	T	T
Challenger	ZZCH0306S	LOLLITOP SUPPORT POST 72inDECK (SM)	$ 819	71.42	T	T	T	T
Challenger	ZZCH0307	LOLLITOP SUPPORT POST 60inDECK	$ 579	67.03	T	T	T	T
Challenger	ZZCH0307S	LOLLITOP SUPPORT POST 60inDECK (SM)	$ 579	67.62	T	T	T	T

Challenger	ZZCH0308	LOLLITOP SUPPORT POST 48inDECK	$ 545	63.26	T	T	T	T
Challenger	ZZCH0308S	LOLLITOP SUPPORT POST 48inDECK (SM)	$ 545	58.01	T	T	T	T
Challenger	ZZCH0309	LOLLITOP SUPPORT POST 36inDECK	$ 531	59.44	T	T	T	T
Challenger	ZZCH0309S	LOLLITOP SUPPORT POST 36inDECK (SM)	$ 531	60.03	T	T	T	T
Challenger	ZZCH0316	1.5ft SWAGED POST EXTENSION	$ 98	10.36	T	T	T	T
Challenger	ZZCH0317	2.5ft SWAGED POST EXTENSION	$ 116	15.13	T	T	T	T
Challenger	ZZCH0318	LOLLITOP SUPPORT POST 24inDECK	$ 519	55.65	T	T	T	T
Challenger	ZZCH0318S	LOLLITOP SUPPORT POST 24inDECK (SM)	$ 519	56.23	T	T	T	T
Challenger	ZZCH0319	LOLLITOP SUPPORT POST 12inDECK	$ 502	51.85	T	T	T	T
Challenger	ZZCH0319S	LOLLITOP SUPPORT POST 12inDECK (SM)	$ 502	52.44	T	T	T	T
Challenger	ZZCH0328	ARCH FOR SWAGED POSTS	$ 1,055	38.38	T	T	T	T
Challenger	ZZCH0328A	ALUMINUM ARCH FOR SWAGED	$ 1,288	12.28	T	T	T	T
Challenger	ZZCH0336	3.5in OD CUSTOM GRAPHICPOST TOP	$ 1,649	27.77	T	T	T	T
Challenger	ZZCH0338	STEEL ARCH CUSTOM GRAPHIC FORSWAGED POST	$ 2,970	68.08	T	T	T	T
Challenger	ZZCH0347GZ	GROUND ZERO LOLLITOP SUPPORTPOST (174.70)	$ 513	55.65	T	T	T	T
Challenger	ZZCH0348GZ	GROUND ZERO LOLLITOP SUPPORTPOST (210.70)	$ 563	67.03	T	T	T	T
Challenger	ZZCH0356	3.50in x 88in STEEL POST w/CAP	$ 247	29.71	T	T	T	T
Challenger	ZZCH0356S	3.50in x 52in STEEL POSTSURFACE MOUNT w/CAP	$ 247	28.28	T	T	T	T
Challenger	ZZCH0358	CH ARCH W/ CUSTOM SIGN INSERT	$ 3,789	68.70	T	T	T	T
Challenger	ZZCH0359	CH POST TOPPER W/ CUSTOM SIGNINSERT	$ 3,396	28.30	T	T	T	T
Challenger	ZZCH0366	1ft POST EXTENSION FOOTER &CLAMP SUPPORT	$ 192	8.52	T	T	T	T
Challenger	ZZCH0367	2ft POST EXTENSION FOOTER &CLAMP SUPPORT	$ 207	13.29	T	T	T	T
Challenger	ZZCH0368	3ft POST EXTENSION FOOTER &CLAMP SUPPORT	$ 214	18.05	T	T	T	T
Challenger	ZZCH0369	POST EXTENSION CLAMP SUPPORT	$ 104	2.33	T	T	T	T
Challenger	ZZCH0377	2FT POST EXTENSION FOOTER &	$ 207	17.71	T	T	T	T
Challenger	ZZCH0378	3FT POST EXTENSION FOOTER &	$ 214	24.31	T	T	T	T
Challenger	ZZCH0385	3.5IN OD X 162IN SHADE POST (24IN & 36IN DECKS)	$ 400	87.1	T	T	T	T
Challenger	ZZCH0386	3.5in OD x 186in LARGE SHADE HAT POST (48in & 60in DECK)	$ 334	100.11	T	T	T	T
Challenger	ZZCH0387	3.5in OD x 210in LARGE SHADE HAT POST (72in & 84in DECK)	$ 367	113.31	T	T	T	T
Challenger	ZZCH0388	3.5in OD x 234in LARGE SHADE HAT POST (96in & 108in DECK)	$ 500	126.51	T	T	T	T
Challenger	ZZCH0411	8FT BENT CAT TAIL BULB POST	$ 515	50.7	T	T	T	T
Challenger	ZZCH0411S	8FT BENT CAT TAIL BULB POST SM	$ 595	51.2	T	T	T	T
Challenger	ZZCH0412	9FT BENT CAT TAIL BULB POST	$ 525	54.5	T	T	T	T
Challenger	ZZCH0412S	9FT BENT CAT TAIL BULB POST SM	$ 525	55	T	T	T	T
Challenger	ZZCH0413	10FT BENT CAT TAIL BULB POST	$ 534	58.4	T	T	T	T
Challenger	ZZCH0413S	10FT BENT CAT TAIL BULB POST SM	$ 534	58.8	T	T	T	T
Challenger	ZZCH0599	WHEELCHAIR CURB FOR HALFPANELS	$ 142	6.75	F	F	F	T
Challenger	ZZCH0616	SQUARE COATED DECK ASSEMBLY	$ 1,349	54.86	T	T	T	T
Challenger	ZZCH0617	TRIANGULAR COATED DECKASSEMBLY	$ 946	29.90	T	T	T	T
Challenger	ZZCH0618	1/2 HEX COATED DECK ASSEMBLY	$ 1,688	78.32	T	T	T	T
Challenger	ZZCH0619	FULL HEX COATED DECK ASSEMBLY	$ 2,872	151.26	T	T	T	T
Challenger	ZZCH0626	CENTER OBLONG COATED DECK ASSEMBLY	$ 1,230	81.40	T	T	T	T
Challenger	ZZCH0627	RIGHT OBLONG COATED DECKASSEMBLY	$ 1,524	80.90	T	T	T	T
Challenger	ZZCH0628	LEFT OBLONG COATED DECKASSEMBLY	$ 1,524	80.90	T	T	T	T
Challenger	ZZCH0629	LONG COATED DECK ASSEMBLY	$ 2,092	107.02	T	T	T	T
Challenger	ZZCH0636	DOUBLE SLIDE COATED DECKASSEMBLY	$ 1,387	63.86	T	T	T	T
Challenger	ZZCH0637	1/2 HEX COATED DECK W/O CENTERPOST ASSEMBLY	$ 1,343	76.86	T	T	T	T
Challenger	ZZCH0639	45 DEGREE TRI DECK	$ 847	36.90	T	T	T	T
Challenger	ZZCH0657	CRE8PLAY MEDIUM CADRE	$ 98,127	6000.00	T	T	T	T
Challenger	ZZCH0658	CRE8PLAY LARGE CADRE	$ 185,500	9500.00	F	F	F	F
Challenger	ZZCH0676	CH PLAYWOOD SQUARE DECK	$ 2,476	112.13	T	T	T	T
Challenger	ZZCH0677	CH PLAYWOOD HEX DECK	$ 4,290	292.45	T	T	T	T
Challenger	ZZCH0683	NUVO - 36IN TRANSFER STATION	$ 3,337	236.61	T	T	T	T
Challenger	ZZCH0683S	NUVO - 36IN TRANSFER STATION (SM)	$ 3,337	215.62	T	T	T	T
Challenger	ZZCH0684	NUVO - 48IN TRANSFER STATION	$ 4,462	341.94	T	T	T	T
Challenger	ZZCH0684S	NUVO - 48IN TRANSFER STATION (SM)	$ 4,462	320.94	T	T	T	T
Challenger	ZZCH0820	12in DECK STEEL FILLER POST	$ 273	17.68	T	T	T	T
Challenger	ZZCH0820S	12in DECK STEEL FILLER POST	$ 273	18.34	T	T	T	T
Challenger	ZZCH0830	18in DECK STEEL FILLER POST	$ 295	19.66	T	T	T	T
Challenger	ZZCH0830S	18in DECK STEEL FILLER POST	$ 295	20.21	T	T	T	T
Challenger	ZZCH0840	24in DECK STEEL FILLER POST	$ 312	21.53	T	T	T	T
Challenger	ZZCH0840S	24in DECK STEEL FILLER POST	$ 312	22.08	T	T	T	T
Challenger	ZZCH0850	30in DECK STEEL FILLER POST	$ 317	23.4	T	T	T	T
Challenger	ZZCH0850S	30in DECK STEEL FILLER POST	$ 317	24.06	T	T	T	T
Challenger	ZZCH0860	36in DECK STEEL FILLER POST	$ 317	25.27	T	T	T	T
Challenger	ZZCH0860S	36in DECK STEEL FILLER POST	$ 317	25.93	T	T	T	T
Challenger	ZZCH0870	48in DECK STEEL FILLER POST	$ 323	29.12	T	T	T	T
Challenger	ZZCH0870S	48in DECK STEEL FILLER POST	$ 323	29.67	T	T	T	T
Challenger	ZZCH0880	60in DECK STEEL FILLER POST	$ 338	32.86	T	T	T	T
Challenger	ZZCH0880S	60in DECK STEEL FILLER POST	$ 338	33.52	T	T	T	T
Challenger	ZZCH0890	72in DECK STEEL FILLER POST	$ 349	36.71	T	T	T	T
Challenger	ZZCH0890S	72in DECK STEEL FILLER POST	$ 349	37.26	T	T	T	T
Challenger	ZZCH0891	96IN DECK STEEL FILLER POST	$ 470	44.5	T	T	T	T
Challenger	ZZCH0891S	96IN DECK STEEL FILLER POST (SM)	$ 470	45	T	T	T	T
Challenger	ZZCH1032	PLAYHILLS DECK ACCESS 8FT	$ 1,950	128.5	T	T	T	T
Challenger	ZZCH1374	TRIPPPLE RACER SLIDE	$ 9,500	757.46	T	T	T	T
Challenger	ZZCH1374S	TRIPPPLE RACER SLIDE SURFACEMOUNT	$ 9,500	749.06	T	T	T	T
Challenger	ZZCH1850	3.5in OD CANTILEVER POSTFOR MONORAILS	$ 917	78.21	T	T	T	T
Challenger	ZZCH2006	TRANSFER STATION (36in DECK)	$ 2,032	145.80	T	T	T	T
Challenger	ZZCH2006S	TRANSFER STATION (36in DECK)(SURFACE MOUNT)	$ 2,032	141.90	T	T	T	T
Challenger	ZZCH2007	TRANSFER STATION w/TALLGUARDRAIL (36in DECK)	$ 2,105	148.40	T	T	T	T
Challenger	ZZCH2007S	TRANSFER STATION w/TALLGUARDRAIL (36in DECK)(SURF MNT	$ 2,105	144.50	T	T	T	T
Challenger	ZZCH2008	TRANSFER STATION w/BARRIERS(36in DECK)	$ 2,669	180.00	T	T	T	T
Challenger	ZZCH2008S	TRANSFER STATION w/BARRIERS(36in DECK)(SURFACE MOUNT)	$ 2,669	176.10	T	T	T	T
Challenger	ZZCH2027	TRANSFER STATION (48in DECK)	$ 3,592	254.26	T	T	T	T
Challenger	ZZCH2027S	TRANSFER STATION (48in DECK)(SURFACE MOUNT)	$ 3,692	250.36	T	T	T	T
Challenger	ZZCH2110	POST CAP	$ 50	0.51	T	T	T	T
Challenger	ZZCH2196	3.5in DOUBLE DECK HANGER	$ 116	1.47	T	T	T	F
Challenger	ZZCH2324	INFILL PANEL TO TRIPPPLE RACERSLIDE	$ 371	19.57	T	T	T	F
Challenger	ZZCH2510	6in DECK TO DECK KICK PLATE	$ 148	5.85	T	T	T	T
Challenger	ZZCH2516	6in ENTRY SUPPORT BRACKET KICKPLATE	$ 160	5.03	T	T	T	T

Challenger	ZZCH2517	6in KICK PLATE - 45 DEGREETRI-DECK	$ 120	6.99	T	T	T	T
Challenger	ZZCH2530	12in DECK TO DECK KICK PLATE	$ 164	8.85	T	T	T	T
Challenger	ZZCH2536	12in ENTRY SUPPORT BRACKETKICK PLATE	$ 174	9.13	T	T	T	T
Challenger	ZZCH2537	12in KICK PLATE - 45 DEGREETRI-DECK	$ 148	11.99	T	T	T	T
Challenger	ZZCH2658	GLIDE SLIDE (60in DECK)	$ 2,288	135.48	T	T	T	T
Challenger	ZZCH2658S	GLIDE SLIDE (60in DECK)SURFACE MOUNT	$ 2,288	132.68	T	T	T	T
Challenger	ZZCH2659	FREE-STANDING GLIDE SLIDE(60in DECK)	$ 6,755	409.48	T	T	T	T
Challenger	ZZCH2696	GLIDE SLIDE (72in DECK)	$ 2,642	151.63	T	T	T	T
Challenger	ZZCH2696S	GLIDE SLIDE (72in DECK)(SURFACE MOUNT)	$ 2,642	148.83	T	T	T	T
Challenger	ZZCH2697	FREE-STANDING GLIDE SLIDE(72in DECK)	$ 7,542	452.63	T	T	T	T
Challenger	ZZCH2714	360 DEG STAINLESS STEEL SPIRAL SLIDE	$ 20,929	598.4	T	T	T	F
Challenger	ZZCH2714S	360 DEG STAINLESS STEEL SPIRAL SLIDE (SM)	$ 20,929	583.8	T	T	T	F
Challenger	ZZCH2727	TWIST AND SHOUT(48in DECK)	$ 2,703	183.86	T	T	T	T
Challenger	ZZCH2727S	TWIST AND SHOUT(48in DECK SURFACE MOUNT)	$ 2,703	178.26	T	T	T	T
Challenger	ZZCH2728	FREE-STANDING TWIST AND SHOUT(48in DECK)	$ 7,141	475.06	T	T	T	T
Challenger	ZZCH2737	RUMBLE SEAT(60in DECK)	$ 3,140	201.86	T	T	T	T
Challenger	ZZCH2737S	RUMBLE SEAT(60in DECK SURFACE MOUNT)	$ 3,140	196.26	T	T	T	T
Challenger	ZZCH2738	FREE-STANDING RUMBLE SEAT(60in DECK)	$ 8,528	503.20	T	T	T	T
Challenger	ZZCH2805	ENTRY SUPPORT BRACKET	$ 323	12.44	T	T	T	T
Challenger	ZZCH2806	24in STEP-UP BRACKET	$ 694	28.32	T	T	T	T
Challenger	ZZCH2807	18in STEP-UP BRACKET	$ 666	25.32	T	T	T	T
Challenger	ZZCH2808	12in STEP-UP BRACKET	$ 502	18.82	T	T	T	T
Challenger	ZZCH2809	6in STEP-UP BRACKET	$ 454	14.32	T	T	T	T
Challenger	ZZCH2906	STAINLESS STEEL SLIDE - 96IN DECK	$ 12,903	203.48	T	T	T	T
Challenger	ZZCH2906S	STAINLESS STEEL SLIDE - 96IN DECK (SM)	$ 12,903	189.73	T	T	T	T
Challenger	ZZCH2907	STAINLESS STEEL SLIDE - 72IN DECK	$ 11,396	171.58	T	T	T	T
Challenger	ZZCH2907S	STAINLESS STEEL SLIDE - 72IN DECK (SM)	$ 11,396	157.83	T	T	T	T
Challenger	ZZCH2908	STAINLESS STEEL SLIDE - 60IN DECK	$ 9,594	150.68	T	T	T	T
Challenger	ZZCH2908S	STAINLESS STEEL SLIDE - 60IN DECK (SM)	$ 9,594	136.93	T	T	T	T
Challenger	ZZCH2909	STAINLESS STEEL SLIDE - 48IN DECK	$ 8,648	130.88	T	T	T	T
Challenger	ZZCH2909S	STAINLESS STEEL SLIDE - 48IN DECK (SM)	$ 8,648	117.13	T	T	T	T
Challenger	ZZCH2916	STAINLESS STEEL SLIDE - 36IN DECK	$ 7,097	115.48	T	T	T	T
Challenger	ZZCH2916S	STAINLESS STEEL SLIDE - 36IN DECK (SM)	$ 7,097	101.73	T	T	T	T
Challenger	ZZCH2936	STAINLESS STEEL SLIDE - 48IN DECK (48IN POST CENTERS)	$ 9,129	143.1	T	T	T	T
Challenger	ZZCH2936S	STAINLESS STEEL SLIDE - 48IN DECK (48IN POST CENTERS) (SM)	$ 9,129	129.35	T	T	T	T
Challenger	ZZCH2937	STAINLESS STEEL SLIDE - 60IN DECK (48IN POST CENTERS)	$ 9,845	162.9	T	T	T	T
Challenger	ZZCH2937S	STAINLESS STEEL SLIDE - 60IN DECK (48IN POST CENTERS) (SM)	$ 9,845	149.15	T	T	T	T
Challenger	ZZCH2938	STAINLESS STEEL SLIDE - 72IN DECK (48IN POST CENTERS)	$ 11,640	183.8	T	T	T	T
Challenger	ZZCH2938S	STAINLESS STEEL SLIDE - 72IN DECK (48IN POST CENTERS) (SM)	$ 11,640	170.05	T	T	T	T
Challenger	ZZCH3006	30in ROUND TUBE SLIDEENTRANCE/EXIT	$ 3,479	145.10	T	T	T	T
Challenger	ZZCH3006S	30in ROUND TUBE SLIDEENTRANCE/EXIT (SURFACE MOUNT)	$ 3,479	142.30	T	T	T	T
Challenger	ZZCH3106	WIDE GLIDE SLIDE(36in DECK)	$ 2,064	109.94	T	T	T	T
Challenger	ZZCH3106S	WIDE GLIDE SLIDE(36in DECK SURFACE MOUNT)	$ 2,064	106.44	T	T	T	T
Challenger	ZZCH3126	GLIDE SLIDE(48in DECK)	$ 2,026	119.73	T	T	T	T
Challenger	ZZCH3126S	GLIDE SLIDE(48in DECK SURFACE MOUNT)	$ 2,026	116.93	T	T	T	T
Challenger	ZZCH3127	GLIDE SLIDE(36in DECK)	$ 1,583	99.73	T	T	T	T
Challenger	ZZCH3127S	GLIDE SLIDE(36in DECK SURFACE MOUNT)	$ 1,583	96.93	T	T	T	T
Challenger	ZZCH3128	GLIDE SLIDE(30in & 24in DECK)	$ 1,528	100.73	T	T	T	T
Challenger	ZZCH3128S	GLIDE SLIDE (24in DECK)(30in & 24in DECK SURF MNT)	$ 1,528	97.93	T	T	T	T
Challenger	ZZCH3129	90 DEGREE GLIDE SLIDE(36in DECK)	$ 1,747	96.73	T	T	T	T
Challenger	ZZCH3129S	90 DEGREE GLIDE SLIDE(36in DECK SURFACE MOUNT)	$ 1,747	93.93	T	T	T	T
Challenger	ZZCH3185	NATURE SLITHER SLIDE ENTRY/ SLIDE-A-SIDE	$ 2,769	119.7	T	T	T	T
Challenger	ZZCH3185S	NATURE SLITHER SLIDE ENTRY/ SLIDE-A-SIDE (SM)	$ 2,769	115.4	T	T	T	T
Challenger	ZZCH3185SE	NATURE SLITHER SLIDE ENTRY/ SLIDE-A-SIDE (SM)	$ 3,019	109.9	T	T	T	T
Challenger	ZZCH3186	NATURE SLITHER SLIDE ENTRY/EXIT	$ 2,314	84.51	T	T	T	T
Challenger	ZZCH3186S	NATURE SLITHER SLIDE ENTRY/EXIT SURF MOUNT	$ 2,314	81.71	T	T	T	T
Challenger	ZZCH3205	SLITHER SLIDE ENTRY/ SLIDE-A-SIDE	$ 2,332	120.2	T	T	T	T
Challenger	ZZCH3205S	SLITHER SLIDE ENTRY/ SLIDE-A-SIDE (SM)	$ 2,332	115.9	T	T	T	T
Challenger	ZZCH3205SE	SLITHER SLIDE ENTRY/ SLIDE-A-SIDE (SM)	$ 2,582	110.4	T	T	T	T
Challenger	ZZCH3206	SLITHER SLIDE 2.0 ENTRANCE &EXIT	$ 1,863	85.37	T	T	T	T
Challenger	ZZCH3206S	SLITHER SLIDE 2.0 ENTRANCE &EXIT (SURFACE MOUNT)	$ 1,863	82.57	T	T	T	T
Challenger	ZZCH3215	SLITHER SLIDE BALCONY/ SLIDE-A-SIDE	$ 3,931	196.8	T	T	T	T
Challenger	ZZCH3215S	SLITHER SLIDE BALCONY/ SLIDE-A-SIDE (SM)	$ 3,931	192.4	T	T	T	T
Challenger	ZZCH3215SE	SLITHER SLIDE BALCONY/ SLIDE-A-SIDE (SM)	$ 4,181	186.9	T	T	T	T
Challenger	ZZCH3216	SLITHER SLIDE 2.0 BALCONYENTRY/EXIT	$ 3,440	162.06	T	T	T	T
Challenger	ZZCH3216S	SLITHER SLIDE 2.0 BALCONYENTRY/EXIT(SURFACE MOUNT)	$ 3,440	159.26	T	T	T	T
Challenger	ZZCH3236	ZIGZAG SLIDE (60in DECK)	$ 2,572	153.73	T	T	T	T
Challenger	ZZCH3236S	ZIGZAG SLIDE (60in DECK) (SURFMOUNT)	$ 2,572	159.78	T	T	T	T
Challenger	ZZCH3536	FREE-STANDING GLIDE SLIDE(48in DECK)	$ 6,202	383.59	T	T	T	T
Challenger	ZZCH3537	SLIDE- NUVO 360 SPIRAL SLIDE	$ 7,083	650.00	T	T	T	T
Challenger	ZZCH3537S	SLIDE- NUVO 360 SPIRAL SLIDE - SURFACE MOUNT	$ 7,083	650.00	T	T	T	T
Challenger	ZZCH3538	NUVO 36IN DOUBLE SLIDE	$ 2,566	157.29	T	T	T	T
Challenger	ZZCH3538S	NUVO 36IN DOUBLE SLIDE	$ 2,566	150.39	T	T	T	T
Challenger	ZZCH3540	SLIDE- NUVO 360 SPIRAL SLIDE - DRAGON/SERPENT	$ 8,731	460.74	T	T	T	T
Challenger	ZZCH3540S	SLIDE- NUVO 360 SPIRAL SLIDE - DRAGON/SERPENT - SURFACE MOUNT	$ 8,731	439.52	T	T	T	T
Challenger	ZZCH3547	NUVO 360 SPIRAL SLIDE (EN VERSION)	$ 7,214	344.5	T	T	T	T
Challenger	ZZCH3547S	NUVO 360 SPIRAL SLIDE (EN VERSION) (SM)	$ 7,214	323.28	T	T	T	T
Challenger	ZZCH3549	FREE-STANDING NUVO 360 SLIDE (EN VERSION)	$ 11,062	577.4	T	T	T	T
Challenger	ZZCH4095	CENTERLINE PIPE WALL BARRIER	$ 629	28.74	T	T	T	T
Challenger	ZZCH4190	SMALL HAND HOLD	$ 257	6.50	T	T	T	T
Challenger	ZZCH4288	ACCESS GATE	$ 480	17.34	T	T	T	T
Challenger	ZZCH4290	POST MOUNTED STEERING WHEEL	$ 426	7.83	T	T	T	T
Challenger	ZZCH4297	ABC & 123 PANEL	$ 1,317	39.22	T	T	T	T
Challenger	ZZCH4298	ABC & 123 PANEL(GROUND LEVEL)	$ 1,496	35.94	T	T	T	T
Challenger	ZZCH4318	FIND THE WAY HOME PANEL	$ 1,383	39.22	T	T	T	T
Challenger	ZZCH4319	FIND THE WAY HOME PANEL(GROUND LEVEL)	$ 1,557	35.94	T	T	T	T
Challenger	ZZCH4328	ANIMAL LOCATOR PANEL	$ 1,677	47.77	T	T	T	T
Challenger	ZZCH4329	ANIMAL LOCATOR PANEL(GROUND LEVEL)	$ 1,867	44.49	T	T	T	T
Challenger	ZZCH4350	TIC-TAC-TOE ACTIVITY WALL	$ 1,976	45.03	T	T	T	T
Challenger	ZZCH4356	BALCONY	$ 1,681	71.66	T	T	T	T
Challenger	ZZCH4357	PIPEWALL WITH LOWERTELESCOPE	$ 939	32.11	T	T	T	T

Challenger	ZZCH4369	CUSTOM GRAPHICS DESIGN-A-PANEL	$ 2,551	35.74	T	T	T	T
Challenger	ZZCH4373	KALEIDO BARRIER 47.4in TALL LEFT	$ 1,852	43.7	T	T	T	T
Challenger	ZZCH4374	KALEIDO BARRIER 47.4in TALL RIGHT	$ 1,852	43.7	T	T	T	T
Challenger	ZZCH4378	ART PANEL	$ 994	16.63	T	T	T	T
Challenger	ZZCH4379	ART PANEL (GROUND LEVEL)	$ 1,485	20.78	T	T	T	T
Challenger	ZZCH4386	DRIVER PANEL	$ 3,512	64.49	T	T	T	T
Challenger	ZZCH4387	DRIVER PANEL(GROUND LEVEL)	$ 3,676	72.69	T	T	T	T
Challenger	ZZCH4387S	DRIVER PANEL(SURFACE MOUNT)	$ 3,676	72.89	T	T	T	T
Challenger	ZZCH4388	CUSTOM GRAPHIC PANEL(DECK MOUNT)	$ 2,703	85.90	T	T	T	F
Challenger	ZZCH4389	DOUBLE SIDED CUSTOM GRAPHICPANEL (DECK MOUNT)	$ 2,926	95.46	T	T	T	T
Challenger	ZZCH4396	ACCESSIBLE MAZE PANEL	$ 960	17.90	T	T	T	T
Challenger	ZZCH4399	ACCESSIBLE PLANE PANEL	$ 1,278	22.67	T	T	T	T
Challenger	ZZCH4404	KALEIDO BARRIER 47.4in TALL	$ 793	37.6	T	T	T	T
Challenger	ZZCH4406	ACCESSIBLE DRIVING PANEL	$ 1,091	24.07	T	T	T	T
Challenger	ZZCH4407	ACCESSIBLE SOLAR SYSTEMPANEL	$ 1,693	21.42	T	T	T	T
Challenger	ZZCH4408	ACCESSIBLE BUGS PANEL	$ 1,590	33.49	T	T	T	T
Challenger	ZZCH4409	ACCESSIBLE BELL PANEL	$ 1,103	22.16	T	T	T	T
Challenger	ZZCH4417	BELL PANEL FOR LONG SIDE	$ 2,103	64.38	T	T	T	T
Challenger	ZZCH4418	CHIME PANEL FOR LONG SIDE	$ 2,817	80.21	T	T	T	T
Challenger	ZZCH4419	ANIMAL LOCATOR PANEL FOR LONGSIDE	$ 1,649	62.77	T	T	T	T
Challenger	ZZCH4436	DOUBLE SIDED CUSTOM GRAPHICPANEL (GROUND LEVEL)	$ 3,086	103.66	T	T	T	T
Challenger	ZZCH4436S	DOUBLE SIDED CUSTOM GRAPHICPANEL (GROUND LEVEL) SURF MNT	$ 3,086	103.86	T	T	T	T
Challenger	ZZCH4437	CUSTOM GRAPHIC PANEL (GROUNDLEVEL)	$ 2,824	94.10	T	T	T	T
Challenger	ZZCH4437S	CUSTOM GRAPHIC PANEL (GROUNDLEVEL) SURFACE MOUNT	$ 2,824	94.30	T	T	T	T
Challenger	ZZCH4441	VORTEX SUPPORT LEGS	$ 557	61.6	T	T	T	T
Challenger	ZZCH4446	SLIDE-N-LEARN PANEL	$ 1,874	57.80	T	T	T	T
Challenger	ZZCH4447	SLIDE-N-LEARN PANEL(GROUND LEVEL)	$ 2,114	57.88	T	T	T	T
Challenger	ZZCH4456	UPPER SILO CLIMBER EXTENDEDBARRIER	$ 797	30.28	T	T	T	T
Challenger	ZZCH4457	TREASURE TUMBLE PANEL	$ 3,505	53.00	T	T	T	T
Challenger	ZZCH4458	TREASURE TUMBLE PANEL(GROUND LEVEL)	$ 3,647	53.28	T	T	T	T
Challenger	ZZCH4467	GROUND TO GROUND BABBLE-ON	$ 1,196	43.15	T	T	T	T
Challenger	ZZCH4487	DRIVE AWAY HALF PANEL	$ 6,847	45.93	T	T	T	T
Challenger	ZZCH4488	DRIVE AWAY PANEL (DECK MOUNT)	$ 7,202	60.50	T	T	T	T
Challenger	ZZCH4489	POST MOUNT ACCESS GATES	$ 640	20.50	T	T	T	T
Challenger	ZZCH4496	GEO BARRIER	$ 1,452	38.33	T	T	T	T
Challenger	ZZCH4506	DOOR PANEL W/ RATTLE KNOBS (GROUND LEVEL)	$ 1,125	25.43	T	T	T	T
Challenger	ZZCH4507	WINDOW PANEL W/ PUSH CLICKER	$ 1,011	29.93	T	T	T	T
Challenger	ZZCH4509	GARDEN PANEL	$ 994	27.03	T	T	T	T
Challenger	ZZCH4516	WHIMSY WHEEL PANEL	$ 1,147	27.83	T	T	T	T
Challenger	ZZCH4527	WINDOW PANEL W/ PUSH CLICKER (GROUND LEVEL)	$ 1,244	32.65	T	T	T	T
Challenger	ZZCH4528	GARDEN PANEL (GROUND LEVEL)	$ 1,234	29.75	T	T	T	T
Challenger	ZZCH4529	WHIMSY WHEEL PANEL (GROUND LEVEL)	$ 1,393	30.55	T	T	T	T
Challenger	ZZCH4537	SPIN RACER PANEL (DECK LEVEL)	$ 1,590	47.70	T	T	T	T
Challenger	ZZCH4538	SPIN RACER PANEL (GROUND LEVEL)	$ 1,758	47.14	T	T	T	T
Challenger	ZZCH4539	30IN ROUND CRAWL TUBE	$ 2,824	102.83	T	T	T	T
Challenger	ZZCH4546	SCAVENGER HUNT (DECK LEVEL)	$ 2,096	40.25	T	T	T	T
Challenger	ZZCH4547	SCAVENGER HUNT (GROUND LEVEL)	$ 2,278	42.88	T	T	T	T
Challenger	ZZCH4548	NATURE HUNT PANEL (DECKLEVEL)	$ 1,798	38.93	T	T	T	T
Challenger	ZZCH4549	NATURE HUNT PANEL (GROUNDLEVEL)	$ 1,955	39.36	T	T	T	T
Challenger	ZZCH4556	7in BELL (POST MOUNT)	$ 273	4.61	T	T	T	T
Challenger	ZZCH4557	8in BELL (POST MOUNT)	$ 291	5.15	T	T	T	T
Challenger	ZZCH4558	9in BELL (POST MOUNT)	$ 305	6.21	T	T	T	T
Challenger	ZZCH4559	10in BELL (POST MOUNT)	$ 323	6.87	T	T	T	T
Challenger	ZZCH4570	PLAY SEAT	$ 1,087	37.65	T	T	T	T
Challenger	ZZCH4578	ANYWHERE SEAT	$ 672	31.10	T	T	T	T
Challenger	ZZCH4586	DRUM PANEL	$ 1,518	43.92	T	T	T	T
Challenger	ZZCH4587	DRUM PANEL(GROUND LEVEL)	$ 1,681	44.64	T	T	T	T
Challenger	ZZCH4588	BELL PANEL	$ 1,655	46.07	T	T	T	T
Challenger	ZZCH4589	BELL PANEL(GROUND LEVEL)	$ 1,819	46.91	T	T	T	T
Challenger	ZZCH4606	CHIME PANEL	$ 2,020	54.51	T	T	T	T
Challenger	ZZCH4607	CHIME PANEL(GROUND LEVEL)	$ 2,162	54.97	T	T	T	T
Challenger	ZZCH4608	CHIME BANNER	$ 1,266	26.43	T	T	T	T
Challenger	ZZCH4609	HORN PANEL	$ 1,852	41.62	T	T	T	T
Challenger	ZZCH4611	HORN PANEL GROUND LEVEL	$ 1,987	43.14	T	T	T	T
Challenger	ZZCH4626	WINDOW PLANTER PANEL	$ 1,802	42.83	T	T	T	T
Challenger	ZZCH4627	MAGNIFYING PLAY PANEL	$ 1,790	34.66	T	T	T	T
Challenger	ZZCH4636	NATURE SOUNDS PANEL (DECK MOUNT)	$ 5,034	30.31	T	T	T	T
Challenger	ZZCH4637	NATURE SOUNDS HALF PANEL	$ 4,651	32.98	T	T	T	T
Challenger	ZZCH4638	NATURE SOUNDS POST MOUNT PANEL	$ 4,069	30.03	T	T	T	T
Challenger	ZZCH4639	TREE HOUSE DOORWAY	$ 1,070	22.42	T	T	T	T
Challenger	ZZCH4646	STORE FRONT PANEL	$ 1,065	33.98	T	T	T	T
Challenger	ZZCH4647	TREE HOUSE BARRIER	$ 1,310	42.82	T	T	T	T
Challenger	ZZCH4648	POST MOUNT SCAVENGER HUNT	$ 1,121	15.86	T	T	T	T
Challenger	ZZCH4649	POST MOUNT DRUM	$ 589	12.78	T	T	T	T
Challenger	ZZCH4658	PLAYWOOD ACCESS GATES	$ 880	33.44	T	T	T	T
Challenger	ZZCH4659	PLAYWOOD WALL BARRIER	$ 917	47.22	T	T	T	T
Challenger	ZZCH4671	CH PANEL FRAME - DECK LEVEL	$ 490	32.87	T	T	T	T
Challenger	ZZCH4672	CH PANEL FRAME - GROUND LEVEL	$ 630	32.14	T	T	T	T
Challenger	ZZCH4687	SKYLIGHT	$ 1,933	87.2	T	T	T	T
Challenger	ZZCH4695	MIGHTY DESCENT W/ PRISM PASS	$ 17,195	1138.3	T	T	T	T
Challenger	ZZCH4695S	MIGHTY DESCENT W/ PRISM PASS (SM)	$ 17,195	1130.6	T	T	T	T
Challenger	ZZCH4696	MIGHTY DESCENT	$ 10,708	748.6	T	T	T	T
Challenger	ZZCH4696S	MIGHTY DESCENT (SM)	$ 10,708	735.7	T	T	T	T
Challenger	ZZCH4697	MIGHTY DESCENT FOR HILL	$ 10,286	665.2	T	T	T	T
Challenger	ZZCH4697S	MIGHTY DESCENT FOR HILL (SM)	$ 10,286	651.9	T	T	T	T
Challenger	ZZCH4701	VERTICLIMBER 36IN	$ 1,768	101.3	T	T	T	T
Challenger	ZZCH4701S	VERTICLIMBER 36IN (SM)	$ 1,768	99.4	T	T	T	T
Challenger	ZZCH4702	VERTICLIMBER 48IN	$ 1,950	109.5	T	T	T	T
Challenger	ZZCH4702S	VERTICLIMBER 48IN (SM)	$ 1,950	107.7	T	T	T	T
Challenger	ZZCH4703	VERTICLIMBER 60IN	$ 2,016	117.9	T	T	T	T
Challenger	ZZCH4703S	VERTICLIMBER 60IN (SM)	$ 2,016	116	T	T	T	T

Challenger	ZZCH4704	VERTICLIMBER 72IN	$ 2,074	126.4	T	T	T	T
Challenger	ZZCH4704S	VERTICLIMBER 72IN (SM)	$ 2,074	124.6	T	T	T	T
Challenger	ZZCH4705	VERTICLIMBER 84IN	$ 2,096	132.6	T	T	T	T
Challenger	ZZCH4705S	VERTICLIMBER 84IN (SM)	$ 2,096	130.8	T	T	T	T
Challenger	ZZCH4706	VERTICLIMBER 96IN	$ 2,475	142.4	T	T	T	T
Challenger	ZZCH4706S	VERTICLIMBER 96IN (SM)	$ 2,475	139.7	T	T	T	T
Challenger	ZZCH4707	CONVERGE	$ 13,421	714.9	T	T	T	T
Challenger	ZZCH4707S	CONVERGE (SM)	$ 13,421	625.8	T	T	T	T
Challenger	ZZCH4708	ROUND THE CORNER	$ 8,731	555	T	T	T	T
Challenger	ZZCH4708S	ROUND THE CORNER (SM)	$ 8,731	501.9	T	T	T	T
Challenger	ZZCH4709	KINETIC FLAG	$ 915	39.9	T	T	T	T
Challenger	ZZCH4714	17FT HEX HAT SHADE	$ 7,345	627.9	T	T	T	T
Challenger	ZZCH4715	26FT HEX HAT SHADE	$ 11,177	838.4	T	T	T	T
Challenger	ZZCH4716	12FT SQUARE HAT SHADE	$ 6,329	415	T	T	T	T
Challenger	ZZCH4717	18FT SQUARE HAT SHADE	$ 9,609	555.7	T	T	T	T
Challenger	ZZCH4745	CONTAINMENT PIPE WALL(HEX TOWER)	$ 906	36.60	T	T	T	F
Challenger	ZZCH4807	OVAL INSERT PANEL (DECK MOUNT)	$ 829	28.16	T	T	T	T
Challenger	ZZCH4808	OVAL INSERT PANEL(GROUND LEVEL)	$ 1,033	15.22	T	T	T	T
Challenger	ZZCH4811	OVAL BUBBLE PANEL (DECK MOUNT)	$ 1,240	33.39	T	T	T	T
Challenger	ZZCH4812	OVAL BUBBLE PANEL (GROUND LEVEL)	$ 1,397	30.47	T	T	T	T
RopeScapes	ZZCH4833	OFFSET ACCESS BARRIER	$ 285	20	T	T	T	T
Challenger	ZZCH4836	NUVO ACTIVITY PANEL	$ 1,142	19.58	T	T	T	T
Challenger	ZZCH4837	NUVO - ACCESS GATE W/ HANDLE	$ 749	17.43	T	T	F	T
Challenger	ZZCH4838	NUVO - ACCESS GATE W/ HANDLE FOR CSA	$ 220	5.08	T	T	T	T
Challenger	ZZCH4887	CH CUSTOM GRAPHIC GROUND LEVEL	$ 3,359	72.19	T	T	T	T
Challenger	ZZCH4888	CUSTOM GRAPHIC DECK LEVEL	$ 3,821	72.24	T	T	T	T
Challenger	ZZCH4889	CUSTOM GRAPHIC LIFE-SIZE	$ 6,515	117.11	T	T	T	T
Challenger	ZZCH4896	SLING SEAT	$ 698	17.60	T	T	T	T
Challenger	ZZCH5009	ANGLED FLAG	$ 528	25.50	T	T	T	T
Challenger	ZZCH5190	CRAWL THRU PANEL(GROUND LEVEL)	$ 1,048	15.64	T	T	T	T
Challenger	ZZCH5206	NATURE LOG TUBE (DECK LEVEL)	$ 3,468	120.95	T	T	T	T
Challenger	ZZCH5207	NATURE LOG TUBE (GROUND LEVEL)	$ 3,756	122.01	T	T	F	T
Challenger	ZZCH5691	PASSAGE ADVENTURE TUBE 2.0	$ 2,632	97.1	T	T	T	T
Challenger	ZZCH5692	BEND ADVENTURE TUBE 2.0	$ 2,824	88.5	T	T	T	T
Challenger	ZZCH5693	FUNNEL ADVENTURE TUBE 2.0	$ 3,960	155.4	T	T	T	T
Challenger	ZZCH5694	VERTICAL S ADVENTURE TUBE 2.0	$ 4,292	136.6	T	T	T	T
Challenger	ZZCH5695	HORIZONTAL S & 90 DEGREE ADVENTURE TUBE 2.0	$ 4,127	134.8	T	T	T	T
Challenger	ZZCH5696	PASSAGE ADVENTURE TUBE (GROUND LEVEL) 2.0	$ 2,977	97.6	T	T	T	T
Challenger	ZZCH5697	HORIZONTAL S/90 DEG ADVENTURE TUBE (GROUND LVL) 2.0	$ 4,466	135.3	T	T	T	T
Challenger	ZZCH5698	FUNNEL ADVENTURE TUBE (GROUND TO DECK) 2.0	$ 4,139	154.9	T	T	T	T
Challenger	ZZCH5699	BEND ADVENTURE CRAWL TUBE (GROUND LEVEL) 2.0	$ 3,174	89	T	T	T	T
Challenger	ZZCH5701	DOUBLE PASSAGE ADVENTURE TUBE (GROUND LVL) 2.0	$ 4,091	152.5	T	T	T	T
Challenger	ZZCH5702	VERTICAL S CRAWL ADVENTURE TUBE (GROUND LEVEL) 2.0	$ 4,484	136.9	T	T	T	T
Challenger	ZZCH5703	DOUBLE PASSAGE ADVENTURE TUBE (DECK LEVEL) 2.0	$ 4,451	152	T	T	T	T
Challenger	ZZCH5716	270 DEGREE HORIZONTAL LOOPLADDER	$ 4,407	163.86	T	T	T	T
Challenger	ZZCH5716S	270 DEGREE HORIZONTAL LOOPLADDER SURFACE MOUNT	$ 4,407	160.86	T	T	T	T
Challenger	ZZCH5736	CHINNING - TURNING BAR	$ 236	5.95	T	T	T	T
Challenger	ZZCH5770	LEG LIFT	$ 192	6.76	T	T	T	F
Challenger	ZZCH5780	6ft HORIZONTAL LOOP LADDER	$ 982	55.72	T	T	T	T
Challenger	ZZCH5790	10ft HORIZONTAL LOOP LADDER	$ 1,667	79.96	T	T	T	T
Challenger	ZZCH5850	90 DEGREE HORIZONTAL LOOPLADDER	$ 1,448	67.90	T	T	T	T
Challenger	ZZCH5880	6ft HORIZONTAL SPIRAL LADDER	$ 1,099	63.32	T	T	T	T
Challenger	ZZCH5950	OVERHEAD EVENT ACCESS LADDER(12in DECK)	$ 567	24.62	T	T	T	T
Challenger	ZZCH5950S	OVERHEAD EVENT ACCESS LADDER1 RUNG (SURFACE MOUNT)	$ 567	26.62	T	T	T	T
Challenger	ZZCH5960	OVERHEAD EVENT ACCESS LADDER(24in DECK)	$ 585	23.52	T	T	T	T
Challenger	ZZCH5960S	OVERHEAD EVENT ACCESS LADDER2 RUNG (SURFACE MOUNT)	$ 585	26.87	T	T	T	T
Challenger	ZZCH5970	OVERHEAD EVENT ACCESS LADDER(36in DECK)	$ 672	25.12	T	T	T	T
Challenger	ZZCH5970S	OVERHEAD EVENT ACCESS LADDER3 RUNG (SURFACE MOUNT)	$ 672	27.12	T	T	T	T
Challenger	ZZCH6080	48IN TRI-VERSE CLIMBER	$ 3,125	86.4	T	T	T	T
Challenger	ZZCH6080S	48IN TRI-VERSE CLIMBER (SM)	$ 3,125	78.5	T	T	T	T
Challenger	ZZCH6080SD	48IN TRI-VERSE CLIMBER (4IN SM)	$ 3,375	78.5	T	T	T	T
Challenger	ZZCH6081	72IN TRI-VERSE CLIMBER	$ 3,450	107.3	T	T	T	T
Challenger	ZZCH6081S	72IN TRI-VERSE CLIMBER (SM)	$ 3,450	95.7	T	T	T	T
Challenger	ZZCH6081SD	72IN TRI-VERSE CLIMBER (4IN SM)	$ 3,700	95.7	T	T	T	T
Challenger	ZZCH6082	96IN TRI-VERSE CLIMBER	$ 4,150	124.6	T	T	T	T
Challenger	ZZCH6082S	96IN TRI-VERSE CLIMBER (SM)	$ 4,150	113	T	T	T	T
Challenger	ZZCH6082SD	96IN TRI-VERSE CLIMBER (4IN SM)	$ 4,400	113	T	T	T	T
Challenger	ZZCH6083	FLEX GRIP CROSSING	$ 4,150	189.3	T	T	T	T
Challenger	ZZCH6084	FLEX GRIP PIVOT	$ 3,025	140.8	T	T	T	T
Challenger	ZZCH6084S	FLEX GRIP PIVOT (SM)	$ 3,025	124.4	T	T	T	T
Challenger	ZZCH6084SD	FLEX GRIP PIVOT (4IN SM)	$ 3,275	125.3	T	T	T	T
Challenger	ZZCH6085	FLEX STEP CROSSING	$ 5,100	144.1	T	T	T	T
Challenger	ZZCH6086	DECK MOUNT SKY PANEL FOR ACTIVITY INSERT	$ 1,025	45.5	T	T	T	T
Challenger	ZZCH6089	DYNAMIC TERRACE	$ 12,450	744.7	T	T	T	T
Challenger	ZZCH6089S	DYNAMIC TERRACE (SM)	$ 12,450	649.1	T	T	T	T
Challenger	ZZCH6089SD	DYNAMIC TERRACE (4IN SM)	$ 12,700	673.5	T	T	T	T
Challenger	ZZCH6089SE	DYNAMIC TERRACE (4.25IN SM)	$ 12,700	652.3	T	T	T	T
Challenger	ZZCH6090	DYNAMIC TERRACE DOUBLE	$ 24,800	1536.6	T	T	T	T
Challenger	ZZCH6090S	DYNAMIC TERRACE DOUBLE (SM)	$ 24,800	1345.3	T	T	T	T
Challenger	ZZCH6090SD	DYNAMIC TERRACE DOUBLE (4IN SM)	$ 25,050	1394.2	T	T	T	T
Challenger	ZZCH6090SE	DYNAMIC TERRACE DOUBLE (4.25IN SM)	$ 25,050	1351.6	T	T	T	T
Challenger	ZZCH6180	18in DECK TO DECK CLIMBER	$ 895	36.84	T	T	T	T
Challenger	ZZCH6190	24in DECK TO DECK CLIMBER	$ 1,011	41.34	T	T	T	T
Challenger	ZZCH6200	30 in DECK TO DECK CLIMBER	$ 1,065	47.34	T	T	T	T
Challenger	ZZCH6210	36 in DECK TO DECK CLIMBER	$ 1,059	75.84	T	T	T	T
RopeScapes	ZZCH6312	SLACK LINE - NAICA TO CH POST	$ 686	18.7	T	T	T	T
RopeScapes	ZZCH6313	TRAIL SLING - NAICA TO CH POST	$ 3,640	96.5	T	T	T	T
RopeScapes	ZZCH6314	SLACK LINE - QUITO TO CH POST	$ 686	16.2	T	T	T	T
Challenger	ZZCH6380	KALEIDOCROSSING	$ 9,434	364.7	T	T	T	T
Challenger	ZZCH6381	KALEIDOCROSSING CATWALK	$ 8,420	289.9	T	T	T	T
Challenger	ZZCH6387	6ft CANYON CROSSING (DK TO DK)	$ 3,217	79.36	T	T	T	T

Challenger	ZZCH6388	6ft CANYON CROSSING (12in RISE)	$ 3,188	81.01	T	T	T	T
Challenger	ZZCH6398	6ft ROPE BRIDGE	$ 5,183	225.60	T	T	T	T
Challenger	ZZCH6399	10ft ROPE BRIDGE	$ 6,537	109.71	T	T	T	T
Challenger	ZZCH6426	CRAZY BONES 6ft ARCH BRIDGE	$ 7,148	296.40	T	T	T	T
Challenger	ZZCH6427	CRAZY BONES 6ft ARCH BRIDGEw/BINOCULARS	$ 8,189	308.76	T	T	T	T
Challenger	ZZCH6428	CRAZY BONES 6ft ARCH BRIDGEw/CUSTOM LETTERING	$ 8,622	302.40	T	T	T	T
Challenger	ZZCH6429	CRAZY BONES 6ft ARCH BRIDGEw/BINOCULARS &CUSTOM LETTERING	$ 9,027	311.76	T	T	T	T
Challenger	ZZCH6446	CRAZY BONES 10ft ARCH BRIDGE	$ 11,356	461.68	T	T	T	T
Challenger	ZZCH6447	CRAZY BONES 10ft ARCH BRIDGEw/BINOCULARS	$ 12,805	473.04	T	T	T	T
Challenger	ZZCH6448	CRAZY BONES 10ft ARCH BRIDGEw/CUSTOM LETTERING	$ 13,023	471.68	T	T	T	T
Challenger	ZZCH6449	CRAZY BONES 10ft ARCH BRIDGEw/BINOCULARS /CUSTOM LETTERING	$ 12,805	478.04	T	T	T	T
Challenger	ZZCH6456	90 DEGREE CLOUD WALK	$ 5,908	263.72	T	T	T	T
Challenger	ZZCH6458	DECK TO DECK CLOUD WALK(36in RISE RIGHT)	$ 7,808	285.85	T	T	T	T
Challenger	ZZCH6459	DECK TO DECK CLOUD WALK(36in RISE LEFT)	$ 7,808	285.85	T	T	T	T
Challenger	ZZCH6478	CRAZY BONES 6ft x 1ft RISEBRIDGE	$ 7,552	292.40	T	T	T	T
Challenger	ZZCH6479	CRAZY BONES 6ft x 2ft RISEBRIDGE	$ 8,419	305.36	T	T	T	T
Challenger	ZZCH6595	6ft ARCH BRIDGE	$ 3,363	183.35	T	T	T	T
Challenger	ZZCH6596	10ft ADVENTURE BRIDGEw/ISO43 CHAIN	$ 9,835	281.72	T	T	T	T
Challenger	ZZCH6597	6ft ADVENTURE BRIDGEw/ISO43 CHAIN	$ 5,896	178.54	T	T	T	T
Challenger	ZZCH6606	LILY PODS	$ 5,886	238.70	T	T	T	T
Challenger	ZZCH6606S	LILY PODS(SURFACE MOUNT)	$ 5,886	255.77	T	T	T	T
Challenger	ZZCH6636	10ft ARCH BRIDGE	$ 5,648	308.02	T	T	T	T
Challenger	ZZCH6729	CONTAINMENT LEVEL FILLER BRACKET	$ 148	8.8	T	T	T	T
Challenger	ZZCH6730	KALEIDOCLIMBER	$ 9,730	289.8	T	T	T	T
Challenger	ZZCH6756	4ft GEO CLIMBER	$ 2,719	114.52	T	T	T	T
Challenger	ZZCH6757	5ft GEO CLIMBER	$ 2,747	120.46	T	T	T	T
Challenger	ZZCH6757S	5ft GEO CLIMBER(SURFACE MOUNT)	$ 2,747	109.90	T	T	T	T
Challenger	ZZCH6770	RHYTHM SPINNER HALF PANEL	$ 7,687	37.90	T	T	T	T
Challenger	ZZCH6776	RHYTHM SPINNER (DECK MOUNT)	$ 7,945	51.60	T	T	T	T
Challenger	ZZCH6780	ANIMAL TUNES HALF PANEL	$ 4,844	38.40	T	T	T	T
Challenger	ZZCH6786	ANIMAL TUNES PANEL DECK MOUNT	$ 5,215	51.24	T	T	T	T
Challenger	ZZCH6787	ANIMAL TUNES POST MOUNT PANEL	$ 4,156	28.46	T	T	T	T
Challenger	ZZCH6790	POST MOUNT SPINNER	$ 3,968	54.2	T	T	T	T
Challenger	ZZCH6798	SPIN CENTRAL - CSA (CH)	$ 2,042	54.76	T	T	T	T
Challenger	ZZCH6799	CSA VORTEX (CH)	$ 4,651	178.30	T	T	T	T
Challenger	ZZCH6808	SKY SWIVELS	$ 2,785	103.86	T	T	T	T
Challenger	ZZCH6809	TWISTER	$ 3,996	104.80	T	T	F	T
Challenger	ZZCH6810	VORTEX	$ 4,695	160.91	T	T	F	T
Challenger	ZZCH6816	TREE HOUSE CLIMBER (48in DECK)	$ 2,682	96.24	T	T	T	T
Challenger	ZZCH6816S	TREE HOUSE CLIMBER (48in DECK)SURF MOUNT	$ 2,682	92.94	T	T	T	T
Challenger	ZZCH6817	TREE HOUSE CLIMBER (60in DECK)	$ 2,966	110.56	T	T	T	T
Challenger	ZZCH6817S	TREE HOUSE CLIMBER (60in DECK)SURF MOUNT	$ 2,966	107.04	T	T	T	T
Challenger	ZZCH6818	TREE HOUSE CLIMBER (72in DECK)	$ 3,217	125.78	T	T	T	T
Challenger	ZZCH6818S	TREE HOUSE CLIMBER (72in DECK)SURF MOUNT	$ 3,217	122.48	T	T	T	T
Challenger	ZZCH6819	TREE HOUSE CLIMBER (84in DECK)	$ 3,942	142.94	T	T	T	T
Challenger	ZZCH6819S	TREE HOUSE CLIMBER (84in DECK)SURF MOUNT	$ 3,942	139.64	T	T	T	T
Challenger	ZZCH6820	TREE HOUSE CLIMBER (96in DECK)	$ 4,302	158.14	T	T	T	T
Challenger	ZZCH6820S	TREE HOUSE CLIMBER (96in DECK)SURF MOUNT	$ 4,302	154.84	T	T	T	T
Challenger	ZZCH6827	THE WILDWOOD CLIMBER (60in DK)	$ 3,326	174.24	T	T	T	T
Challenger	ZZCH6827S	THE WILDWOOD CLIMBER (60in DK)SURFACE MOUNT	$ 3,326	163.68	T	T	T	T
Challenger	ZZCH6836	6ft DECK-DECK VINE CLIMBER	$ 8,791	306.87	T	T	T	T
Challenger	ZZCH6836S	6ft DECK-DECK VINE CLIMBERSURF MOUNT	$ 8,791	306.43	T	T	T	T
Challenger	ZZCH6839	THE WILDWOOD CLIMBER (48in DK)	$ 3,287	168.30	T	T	T	T
Challenger	ZZCH6850	U-BOUNCE	$ 2,020	102.88	T	T	T	T
Challenger	ZZCH6857	CRITTER CROSSING	$ 1,623	59.24	T	T	T	T
Challenger	ZZCH6862	HILL SLIDE PLATFORM	$ 895	63.3	T	T	T	T
Challenger	ZZCH6862S	HILL SLIDE PLATFORM (SM)	$ 895	62.9	T	T	T	T
Challenger	ZZCH6888	TWIST-N-TWIRL	$ 1,310	48.49	T	T	T	T
Challenger	ZZCH6895	10ft CATWALK	$ 5,864	315.56	T	T	T	T
Challenger	ZZCH6898	54in CATWALK REPLACEMENT	$ 3,108	184.95	T	T	T	T
Challenger	ZZCH6899	51.5IN CATWALK REPLACEMENT	$ 3,031	177.54	T	T	T	T
Challenger	ZZCH6936	HORIZONTAL LADDER W/PARALLEL BARS	$ 2,074	126.22	T	T	T	T
Challenger	ZZCH6957	NUVO LOOP CLIMBER	$ 4,451	157.88	T	T	T	T
Challenger	ZZCH6958	6ft PLAYWOOD ARCH BRIDGE	$ 5,346	327.89	T	T	T	T
Challenger	ZZCH6959	10ft PLAYWOOD ARCH BRIDGE	$ 8,400	518.10	T	T	T	T
Challenger	ZZCH6966	10ft ROUNDABOUT HORIZONTALLADDER	$ 2,675	139.10	T	T	T	T
Challenger	ZZCH6967	6ft GEO ARCH BRIDGE	$ 6,748	275.84	T	T	T	T
Challenger	ZZCH6968	10ft GEO ARCH BRIDGE	$ 10,457	505.00	T	T	T	T
Challenger	ZZCH6979	INCLINED CLIFF HANGER(96in DECK)	$ 4,145	181.40	T	T	T	T
Challenger	ZZCH6979S	INCLINED CLIFF HANGER(96in DECK) (SURF MNT)	$ 4,145	178.10	T	T	T	T
Challenger	ZZCH6986	INCLINED CLIFF HANGER(84in DECK)	$ 3,877	162.80	T	T	T	T
Challenger	ZZCH6986S	INCLINED CLIFF HANGER(84in DECK) (SURFACE MOUNT)	$ 3,877	159.50	T	T	T	T
Challenger	ZZCH6987	INCLINED CLIFF HANGER(48in DECK)	$ 2,518	107.60	T	T	T	T
Challenger	ZZCH6987S	INCLINED CLIFF HANGER(48in DECK) SURF MNT	$ 2,518	104.30	T	T	T	T
Challenger	ZZCH6988	INCLINED CLIFF HANGER(60in DECK)	$ 2,868	126.00	T	T	T	T
Challenger	ZZCH6988S	INCLINED CLIFF HANGER(60in DECK) SURF MNT	$ 2,868	122.40	T	T	T	T
Challenger	ZZCH6989	INCLINED CLIFF HANGER(72in DECK)	$ 3,064	144.40	T	T	T	T
Challenger	ZZCH6989S	INCLINED CLIFF HANGER(72in DECK) SURF MNT	$ 3,064	141.10	T	T	T	T
Challenger	ZZCH6996	GEO VERTICAL CLIMBER (48in DK)	$ 1,830	57.76	T	T	T	T
Challenger	ZZCH6997	GEO VERTICAL CLIMBER (60in DK)	$ 2,074	62.16	T	T	T	T
Challenger	ZZCH6998	GEO VERTICAL CLIMBER (72in DK)	$ 2,475	75.05	T	T	T	T
Challenger	ZZCH7006	GEO ARCH CLIMBER (48in DK)	$ 1,611	55.71	T	T	T	T
Challenger	ZZCH7006S	GEO ARCH CLIMBER (48in DK)SURF MOUNT	$ 1,611	58.46	T	T	T	T
Challenger	ZZCH7007	GEO ARCH CLIMBER (60in DK)	$ 2,304	71.65	F	F	F	F
Challenger	ZZCH7007S	GEO ARCH CLIMBER (60in DK)SURF MOUNT	$ 2,304	74.62	T	T	T	T
Challenger	ZZCH7008	GEO ARCH CLIMBER (72in DK)	$ 2,457	80.01	T	T	T	T
Challenger	ZZCH7008S	GEO ARCH CLIMBER (72in DK)SURF MOUNT	$ 2,457	82.98	T	T	T	T
Challenger	ZZCH7046	36IN TWIST CLIMBER	$ 2,587	82.51	T	T	T	T
Challenger	ZZCH7046S	36IN TWIST CLIMBER (SM)	$ 2,587	82.51	T	T	T	T
Challenger	ZZCH7047	48IN TWIST CLIMBER	$ 2,641	96.81	T	T	T	T
Challenger	ZZCH7047S	48IN TWIST CLIMBER (SM)	$ 2,641	96.81	T	T	T	T

Challenger	ZZCH7048	60IN TWIST CLIMBER	$ 2,718	106.88	T	T	T	T
Challenger	ZZCH7048S	60IN TWIST CLIMBER (SM)	$ 2,718	106.88	T	T	T	T
Challenger	ZZCH7049	72IN TWIST CLIMBER	$ 3,017	120.08	T	T	T	T
Challenger	ZZCH7049S	72IN TWIST CLIMBER (SM)	$ 3,017	120.08	T	T	T	T
Challenger	ZZCH7056	36IN CURVY CLIMBER	$ 2,813	69.91	T	T	T	T
Challenger	ZZCH7056S	36IN CURVY CLIMBER (SM)	$ 2,813	71.34	T	T	T	T
Challenger	ZZCH7057	48IN CURVY CLIMBER	$ 2,834	73.10	T	T	T	T
Challenger	ZZCH7057S	48IN CURVY CLIMBER (SM)	$ 2,834	76.18	T	T	T	T
Challenger	ZZCH7058	60IN CURVY CLIMBER	$ 2,970	80.36	T	T	T	T
Challenger	ZZCH7058S	60IN CURVY CLIMBER (SM)	$ 2,970	81.13	T	T	T	T
Challenger	ZZCH7059	72IN CURVY CLIMBER	$ 3,064	85.42	T	T	T	T
Challenger	ZZCH7059S	72IN CURVY CLIMBER (SM)	$ 3,064	86.08	T	T	T	T
Challenger	ZZCH7066	RUSHMORE	$ 21,497	861.68	T	T	T	T
Challenger	ZZCH7066S	RUSHMORE (SM)	$ 21,497	625.41	T	T	T	T
Challenger	ZZCH7067	SKY RAIL	$ 4,498	152.10	T	T	T	F
Challenger	ZZCH7068	SKY RAIL (EN)	$ 4,673	151.6	T	T	T	T
Challenger	ZZCH7085	6ft CATWALK	$ 3,730	233.76	T	T	T	T
Challenger	ZZCH7086	CLIMBING SQUARES BLOCK CLIMBER (24IN)	$ 1,605	70.75	T	T	T	T
Challenger	ZZCH7086S	CLIMBING SQUARES BLOCK CLIMBER (24IN) (SURFACE MOUNT)	$ 1,605	65.45	T	T	T	T
Challenger	ZZCH7087	CLIMBING SQUARES BLOCK CLIMBER (36IN)	$ 2,173	111.51	T	T	T	T
Challenger	ZZCH7087S	CLIMBING SQUARES BLOCK CLIMBER (36IN) (SURFACE MOUNT)	$ 2,173	96.88	T	T	T	T
Challenger	ZZCH7088	CLIMBING SQUARES BLOCK CLIMBER (48IN)	$ 3,232	157.81	T	T	T	T
Challenger	ZZCH7088S	CLIMBING SQUARES BLOCK CLIMBER (48IN) (SURFACE MOUNT)	$ 3,232	138.96	T	T	T	T
Challenger	ZZCH7160	6ft TWISTED CLIMBER	$ 2,817	117.65	T	T	T	T
Challenger	ZZCH7160S	6ft TWISTED CLIMBER(SURFACE MOUNT)	$ 2,817	117.53	T	T	T	T
Challenger	ZZCH7166	7ft TWISTED CLIMBER	$ 2,894	123.91	T	T	T	T
Challenger	ZZCH7166S	7ft TWISTED CLIMBER(SURFACE MOUNT)	$ 2,894	123.69	T	T	T	T
Challenger	ZZCH7167	8ft TWISTED CLIMBER	$ 2,944	130.73	T	T	T	T
Challenger	ZZCH7167S	8ft TWISTED CLIMBER(SURFACE MOUNT)	$ 2,944	130.29	T	T	T	T
Challenger	ZZCH7168	6ft TOWER CLIMBER	$ 2,496	100.77	T	T	T	T
Challenger	ZZCH7168S	6ft TOWER CLIMBER(SURFACE MOUNT)	$ 2,496	103.52	T	T	T	T
Challenger	ZZCH7169	7ft TOWER CLIMBER	$ 2,606	107.92	T	T	T	T
Challenger	ZZCH7169S	7ft TOWER CLIMBER(SURFACE MOUNT)	$ 2,606	111.22	T	T	T	T
Challenger	ZZCH7170	8ft TOWER CLIMBER	$ 2,741	115.62	T	T	T	T
Challenger	ZZCH7170S	8ft TOWER CLIMBER(SURFACE MOUNT)	$ 2,741	117.82	T	T	T	T
Challenger	ZZCH7178	ANGLED CLIMBER SMALL (24inDECK)	$ 1,693	51.51	T	T	T	T
Challenger	ZZCH7179	ANGLED CLIMBER SMALL (36inDECK)	$ 1,732	54.41	T	T	T	T
Challenger	ZZCH7180	ANGLED CLIMBER SMALL (48inDECK)	$ 1,768	55.71	T	T	T	T
Challenger	ZZCH7189	ANGLED CLIMBER LARGE (48inDECK)	$ 1,780	57.91	T	T	T	T
Challenger	ZZCH7190	ANGLED CLIMBER LARGE (60inDECK)	$ 1,819	60.41	T	T	T	T
Challenger	ZZCH7196	ANGLED CLIMBER LARGE (72inDECK)	$ 1,852	62.71	T	T	T	T
Challenger	ZZCH7217	36in ROPE ASCENSION	$ 2,594	81.21	T	T	T	T
Challenger	ZZCH7217S	36in ROPE ASCENSION (SURFACE MOUNT)	$ 2,594	75.53	T	T	T	T
Challenger	ZZCH7218	48in ROPE ASCENSION	$ 2,769	88.13	T	T	T	T
Challenger	ZZCH7218S	48in ROPE ASCENSION (SURFACE MOUNT)	$ 2,769	82.33	T	T	T	T
Challenger	ZZCH7219	60in ROPE ASCENSION	$ 3,457	94.85	T	T	T	T
Challenger	ZZCH7219S	60in ROPE ASCENSION (SURFACE MOUNT)	$ 3,457	89.29	T	T	T	T
Challenger	ZZCH7226	ROPE CLIMBER(36in DECK)	$ 2,463	45.26	T	T	T	T
Challenger	ZZCH7226S	ROPE CLIMBER(36in DECK) (SURFACE MOUNT)	$ 2,463	43.18	T	T	T	T
Challenger	ZZCH7227	ROPE CLIMBER(48in DECK)	$ 2,751	48.56	T	T	T	T
Challenger	ZZCH7227S	ROPE CLIMBER(48in DECK) (SURFACE MOUNT)	$ 2,751	46.48	T	T	T	T
Challenger	ZZCH7228	ROPE CLIMBER (36in DECK)	$ 1,841	28.2	F	F	F	F
Challenger	ZZCH7229	ROPE CLIMBER (48in DECK)	$ 2,344	28.2	F	F	F	F
Challenger	ZZCH7236	ROPE LADDER - 36IN DECK	$ 1,645	50.04	T	T	T	T
Challenger	ZZCH7236S	ROPE LADDER - 36IN DECK (SURFACE MOUNT)	$ 1,645	45.74	T	T	T	T
Challenger	ZZCH7237	ROPE LADDER - 48IN DECK	$ 1,802	51.79	T	T	T	T
Challenger	ZZCH7237S	ROPE LADDER - 48IN DECK (SURFACE MOUNT)	$ 1,802	46.47	T	T	T	T
Challenger	ZZCH7238	ROPE LADDER - 60IN DECK	$ 1,983	52.59	T	T	T	T
Challenger	ZZCH7238S	ROPE LADDER - 60IN DECK (SURFACE MOUNT)	$ 1,983	47.27	T	T	T	T
Challenger	ZZCH7239	ROPE LADDER - 72IN DECK	$ 2,151	53.39	T	T	T	T
Challenger	ZZCH7239S	ROPE LADDER - 72IN DECK (SURFACE MOUNT)	$ 2,151	48.07	T	T	T	T
Challenger	ZZCH7327	6in RISE DK-DK WHEELCHAIR RAMPW/ BARRIERS	$ 4,298	267.20	T	T	T	F
Challenger	ZZCH7328	6in RISE DK-DK WHEELCHAIR RAMPW/ GUARDRAILS	$ 3,359	194.60	T	T	T	F
Challenger	ZZCH7329	6in RISE DK-DK WHEELCHAIR RAMPW/ BARRIERS (EN VERSION)	$ 4,113	249.60	F	F	F	T
Challenger	ZZCH7330	AEROGLIDER DECK EXTENSION FORWHEELCHAIR RAMPS	$ 891	60.97	T	T	T	T
Challenger	ZZCH7330S	AEROGLIDER DECK EXTENSION FORWHEELCHAIR RAMPS (SURF MNT)	$ 891	60.97	T	T	T	T
Challenger	ZZCH7376	GROUND TO DECK WHEELCHAIR RAMPw/BARRIER 12in RISE EN	$ 8,757	482.71	F	F	F	T
Challenger	ZZCH7378	DECK TO DECK WHEELCHAIR RAMPw/BARRIERS (12in RISE) EN	$ 8,255	476.62	F	F	F	T
Challenger	ZZCH7400	DEEP RUNG ARCH CLIMBER(36in DECK)	$ 1,976	76.46	T	T	T	T
Challenger	ZZCH7400S	DEEP RUNG ARCH CLIMBER(36in DECK) (SURFACE MOUNT)	$ 1,976	78.26	T	T	T	T
Challenger	ZZCH7410	DEEP RUNG ARCH CLIMBER(48in DECK)	$ 2,288	93.26	T	T	T	T
Challenger	ZZCH7410S	DEEP RUNG ARCH CLIMBER(48in DECK) (SURFACE MOUNT)	$ 2,288	95.16	T	T	T	T
Challenger	ZZCH7420	DEEP RUNG ARCH CLIMBER(60in DECK)	$ 2,795	99.86	T	T	T	T
Challenger	ZZCH7420S	DEEP RUNG ARCH CLIMBER(60in DECK) (SURFACE MOUNT)	$ 2,795	101.76	T	T	T	T
Challenger	ZZCH7430	DEEP RUNG ARCH CLIMBER(72in DECK)	$ 2,795	111.06	T	T	T	T
Challenger	ZZCH7430S	DEEP RUNG ARCH CLIMBER(72in DECK) (SURFACE MOUNT)	$ 2,795	112.86	T	T	T	T
Challenger	ZZCH7439	ROCK CLIMBER (48in DECK)	$ 2,365	136.38	T	T	T	T
Challenger	ZZCH7439S	ROCK CLIMBER (48in DECK)(SURFACE MOUNT)	$ 2,365	128.38	T	T	T	T
Challenger	ZZCH7535	GROUND TO DECK WHEELCHAIR RAMPW/BARRIER (12in RISE)	$ 9,092	502.71	T	T	T	F
Challenger	ZZCH7548	GROUND TO DECK WHEELCHAIRRAMP W/GUARDRAILS (12in RISE)	$ 7,087	387.71	T	T	T	F
Challenger	ZZCH7556	DECK TO DECK WHEELCHAIR RAMPW/GUARDRAILS (FLAT)	$ 6,023	380.90	T	T	T	F
Challenger	ZZCH7559	DECK TO DECK WHEELCHAIR RAMPW/GUARDRAILS (12in RISE)	$ 6,897	380.90	T	T	T	F
Challenger	ZZCH7656	SOLAR CLIMBER(24in DECK)	$ 2,479	72.08	T	T	T	T
Challenger	ZZCH7656S	SOLAR CLIMBER(24in DECK) (SURFACE MOUNT)	$ 2,479	72.43	T	T	T	T
Challenger	ZZCH7657	SOLAR CLIMBER(36in & 30in DECK)	$ 2,729	79.63	T	T	T	T
Challenger	ZZCH7657S	SOLAR CLIMBER(36in & 30in DECK) (SURF MNT)	$ 2,729	79.98	T	T	T	T
Challenger	ZZCH7658	SOLAR CLIMBER(48in & 42in DECK)	$ 3,031	91.33	T	T	T	T
Challenger	ZZCH7658S	SOLAR CLIMBER(48in & 42in DECK)(SURF MNT)	$ 3,031	101.58	T	T	T	T
Challenger	ZZCH7659	SOLAR CLIMBER(60in & 54in DECK)	$ 3,374	115.58	T	T	T	T
Challenger	ZZCH7659S	SOLAR CLIMBER(60in & 54in DECK)(SURF MNT)	$ 3,374	111.83	T	T	T	T
Challenger	ZZCH7666	SOLAR CLIMBER(72in & 66in DECK)	$ 3,752	128.83	T	T	T	T

Challenger	ZZCH7666S	SOLAR CLIMBER(72in & 66in DECK)(SURF MNT)	$ 3,752	113.78	T	T	T	T
Challenger	ZZCH7795	DECK TO DECK WHEELCHAIR RAMPW/BARRIER (12in RISE)	$ 8,834	495.90	T	T	T	F
Challenger	ZZCH7945	UPPER SILO CLIMBER	$ 2,916	136.94	T	T	T	F
Challenger	ZZCH7948	SILO CLIMBER(24in DECK)	$ 1,252	66.48	T	T	T	T
Challenger	ZZCH7948S	SILO CLIMBER(24in DECK) (SURFACE MOUNT)	$ 1,252	64.28	T	T	T	T
Challenger	ZZCH7949	SILO CLIMBER(36in DECK)	$ 1,278	70.33	T	T	T	T
Challenger	ZZCH7949S	SILO CLIMBER(36in DECK) (SURFACE MOUNT)	$ 1,278	68.13	T	T	T	T
Challenger	ZZCH7950	SILO CLIMBER(48in DECK)	$ 1,328	74.18	T	T	T	T
Challenger	ZZCH7950S	SILO CLIMBER(48in DECK) (SURFACE MOUNT)	$ 1,328	72.53	T	T	T	T
Challenger	ZZCH7956	SILO CLIMBER(60in DECK)	$ 1,404	78.25	T	T	T	T
Challenger	ZZCH7956S	SILO CLIMBER(60in DECK) (SURFACE MOUNT)	$ 1,404	77.48	T	T	T	T
Challenger	ZZCH7957	SILO CLIMBER(72in DECK)	$ 1,404	82.32	T	T	T	T
Challenger	ZZCH7957S	SILO CLIMBER(72in DECK) (SURFACE MOUNT)	$ 1,404	80.12	T	T	T	T
Challenger	ZZCH7966	ROCKY RIDGE CLIMBER(60in DECK)	$ 2,769	125.88	T	T	T	T
Challenger	ZZCH7966S	ROCKY RIDGE CLIMBER(60in DECK) (SURFACE MOUNT)	$ 2,769	116.17	T	T	T	T
Challenger	ZZCH8060	SLIDING POLE (36in DECK)	$ 1,157	54.53	T	T	T	T
Challenger	ZZCH8060S	SLIDING POLE (36in DECK)(SURFACE MOUNT)	$ 1,157	55.79	T	T	T	T
Challenger	ZZCH8070	SLIDING POLE (48in DECK)	$ 1,168	56.43	T	T	T	T
Challenger	ZZCH8070S	SLIDING POLE (48in DECK)(SURFACE MOUNT)	$ 1,168	57.59	T	T	T	T
Challenger	ZZCH8080	SLIDING POLE (60in DECK)	$ 1,175	57.73	T	T	T	T
Challenger	ZZCH8080S	SLIDING POLE (60in DECK)(SURFACE MOUNT)	$ 1,175	58.38	T	T	T	T
Challenger	ZZCH8090	SLIDING POLE (72in DECK)	$ 1,186	59.63	T	T	T	T
Challenger	ZZCH8090S	SLIDING POLE (72in DECK)(SURFACE MOUNT)	$ 1,186	61.79	T	T	T	T
Challenger	ZZCH8100	BEANSTALK CLIMBER(36in DECK)	$ 1,972	69.63	T	T	T	T
Challenger	ZZCH8100S	BEANSTALK CLIMBER(36in DECK) (SURFACE MOUNT)	$ 1,972	70.08	T	T	T	T
Challenger	ZZCH8110	BEANSTALK CLIMBER(48in DECK)	$ 2,223	77.27	T	T	T	T
Challenger	ZZCH8110S	BEANSTALK CLIMBER(48in DECK) (SURFACE MOUNT)	$ 2,223	77.82	T	T	T	T
Challenger	ZZCH8120	BEANSTALK CLIMBER(60in DECK)	$ 2,489	85.31	T	T	T	T
Challenger	ZZCH8120S	BEANSTALK CLIMBER(60in DECK) (SURFACE MOUNT)	$ 2,489	85.06	T	T	T	T
Challenger	ZZCH8130	BEANSTALK CLIMBER(72in DECK)	$ 2,759	92.45	T	T	T	T
Challenger	ZZCH8130S	BEANSTALK CLIMBER(72in DECK) (SURFACE MOUNT)	$ 2,759	91.50	T	T	T	T
Challenger	ZZCH8140	SPIRAL CLIMBER(36in DECK)	$ 1,710	79.83	T	T	T	T
Challenger	ZZCH8140S	SPIRAL CLIMBER(36in DECK) (SURFACE MOUNT)	$ 1,710	80.18	T	T	T	T
Challenger	ZZCH8150	SPIRAL CLIMBER(48in DECK)	$ 1,819	86.33	T	T	T	T
Challenger	ZZCH8150S	SPIRAL CLIMBER(48in DECK) (SURFACE MOUNT)	$ 1,819	82.48	T	T	T	T
Challenger	ZZCH8160	SPIRAL CLIMBER(60in DECK)	$ 1,819	92.33	T	T	T	T
Challenger	ZZCH8160S	SPIRAL CLIMBER(60in DECK) (SURFACE MOUNT)	$ 1,819	94.08	T	T	T	T
Challenger	ZZCH8170	SPIRAL CLIMBER(72in DECK)	$ 1,921	98.43	T	T	T	T
Challenger	ZZCH8170S	SPIRAL CLIMBER(72in DECK) (SURFACE MOUNT)	$ 1,921	100.58	T	T	T	T
Challenger	ZZCH8180	TREE CLIMBER(36in DECK)	$ 1,808	68.93	T	T	T	T
Challenger	ZZCH8180S	TREE CLIMBER(36in DECK) (SURFACE MOUNT)	$ 1,808	69.08	T	T	T	T
Challenger	ZZCH8190	TREE CLIMBER(48in DECK)	$ 1,852	73.93	T	T	T	T
Challenger	ZZCH8190S	TREE CLIMBER(48in DECK) (SURFACE MOUNT)	$ 1,852	74.68	T	T	T	T
Challenger	ZZCH8200	TREE CLIMBER(60in DECK)	$ 1,852	85.03	T	T	T	T
Challenger	ZZCH8200S	TREE CLIMBER(60in DECK) (SURFACE MOUNT)	$ 1,852	79.98	T	T	T	T
Challenger	ZZCH8210	TREE CLIMBER(72in DECK)	$ 1,983	84.23	T	T	T	T
Challenger	ZZCH8210S	TREE CLIMBER (72in DECK)(SURFACE MOUNT)	$ 1,983	82.78	T	T	T	T
Challenger	ZZCH8230	DECK TO DECK ACCESSIBLECLIMBER (24in RISE)	$ 7,131	295.60	T	T	T	T
Challenger	ZZCH8256	48in PLAYWOOD CLIMBER	$ 1,649	69.88	T	T	T	T
Challenger	ZZCH8256S	48in PLAYWOOD CLIMBER (SM)	$ 1,649	72.85	T	T	T	T
Challenger	ZZCH8257	60in PLAYWOOD CLIMBER	$ 1,677	72.30	T	T	T	T
Challenger	ZZCH8257S	60in PLAYWOOD CLIMBER (SM)	$ 1,677	75.38	T	T	T	T
Challenger	ZZCH8258	72in PLAYWOOD CLIMBER	$ 1,802	81.68	T	T	T	T
Challenger	ZZCH8258S	72in PLAYWOOD CLIMBER (SM)	$ 1,802	84.76	T	T	T	T
Challenger	ZZCH8260	HOPSCOTCH CLIMBER(48in DECK)	$ 1,856	68.50	T	T	T	T
Challenger	ZZCH8260S	HOPSCOTCH CLIMBER(48in DECK) (SURFACE MOUNT)	$ 1,856	70.30	T	T	T	T
Challenger	ZZCH8266	48" SINGLE FLEX TREAD	$ 3,021	118.67	T	T	T	T
Challenger	ZZCH8266S	48" SINGLE FLEX TREAD (SM)	$ 3,021	90.87	T	T	T	T
Challenger	ZZCH8267	60" SINGLE FLEX TREAD	$ 3,031	118.67	T	T	T	T
Challenger	ZZCH8267S	60" SINGLE FLEX TREAD (SM)	$ 3,031	90.87	T	T	T	T
Challenger	ZZCH8270	HOPSCOTCH CLIMBER(60in DECK)	$ 2,179	77.90	T	T	T	T
Challenger	ZZCH8270S	HOPSCOTCH CLIMBER(60in DECK) (SURFACE MOUNT)	$ 2,179	79.70	T	T	T	T
Challenger	ZZCH8280	HOPSCOTCH CLIMBER(72in DECK)	$ 2,179	82.50	T	T	T	T
Challenger	ZZCH8280S	HOPSCOTCH CLIMBER(72in DECK) (SURFACE MOUNT)	$ 2,179	84.30	T	T	T	T
Challenger	ZZCH8289	RIBBON CLIMBER(36in DECK)	$ 913	35.02	T	T	T	T
Challenger	ZZCH8289S	RIBBON CLIMBER(36in DECK) SURFACE MOUNT	$ 913	37.62	T	T	T	T
Challenger	ZZCH8290	RIBBON CLIMBER(48in DECK)	$ 1,103	38.72	T	T	T	T
Challenger	ZZCH8290S	RIBBON CLIMBER(48in DECK) (SURFACE MOUNT)	$ 1,103	41.52	T	T	T	T
Challenger	ZZCH8300	RIBBON CLIMBER(60in DECK)	$ 1,147	41.92	T	T	T	T
Challenger	ZZCH8300S	RIBBON CLIMBER(60in DECK) (SURFACE MOUNT)	$ 1,147	45.62	T	T	T	T
Challenger	ZZCH8310	RIBBON CLIMBER(72in DECK)	$ 1,147	46.82	T	T	T	T
Challenger	ZZCH8310S	RIBBON CLIMBER(72in DECK) (SURFACE MOUNT)	$ 1,147	50.42	T	T	T	T
Challenger	ZZCH8338	STEEL SPINE CLIMBER (TRIPPPLE SLIDE)	$ 797	37.73	T	T	T	T
Challenger	ZZCH8338S	STEEL SPINE CLIMBER (TRIPPPLE SLIDE) (SM)	$ 797	39.71	T	T	T	T
Challenger	ZZCH8339	STEEL SPINE CLIMBER	$ 837	48.50	T	T	T	T
Challenger	ZZCH8339S	STEEL SPINE CLIMBER (SM)	$ 837	50.48	T	T	T	T
Challenger	ZZCH8346	SPINE CLIMBER TO TRIPPPLERACER SLIDE	$ 994	50.76	T	T	T	T
Challenger	ZZCH8346S	SPINE CLIMBER TO TRIPPPLERACER SLIDE (SURFACE MOUNT)	$ 994	49.26	T	T	T	T
Challenger	ZZCH8388	THE WALL	$ 6,005	78.48	T	T	T	T
Challenger	ZZCH8389	THE CRISS CROSS	$ 6,639	180.49	T	T	T	T
Challenger	ZZCH8389S	THE CRISS CROSS(SURFACE MOUNT)	$ 6,639	186.65	T	T	T	T
Challenger	ZZCH8390	THE STUMP JUMP	$ 3,538	197.32	T	T	T	T
Challenger	ZZCH8390S	THE STUMP JUMP(SURFACE MOUNT)	$ 3,538	206.56	T	T	T	T
Challenger	ZZCH8397	THE WACKY LOG	$ 4,280	196.57	T	T	T	T
Challenger	ZZCH8397S	THE WACKY LOG(SURFACE MOUNT)	$ 4,280	156.11	T	T	T	T
Challenger	ZZCH8398	THE HELIX	$ 2,300	81.78	T	T	T	T
Challenger	ZZCH8399	THE WAVE	$ 1,699	66.60	T	T	T	T
Challenger	ZZCH8408	THE GRID	$ 2,322	103.67	T	T	T	T
Challenger	ZZCH8449	THE ROPE LINK CLIMBER	$ 1,430	34.10	T	T	T	T
Challenger	ZZCH8450	THE SKY LINK	$ 1,103	54.21	T	T	T	T
Challenger	ZZCH8456	THE SKY ARCH	$ 1,109	44.86	T	T	T	T

Challenger	ZZCH8457	THE CRATER ARCH	$ 2,588	79.50	T	T	T	F
Challenger	ZZCH8457S	THE CRATER ARCH(SURFACE MOUNT)	$ 2,588	80.38	T	T	T	F
Challenger	ZZCH8460	THE CRATER WALL	$ 5,052	188.18	T	T	T	T
Challenger	ZZCH8466	THE CRATER LADDER	$ 2,507	79.95	T	T	T	T
Challenger	ZZCH8467	THE VERTICAL WAVE	$ 1,627	62.49	T	T	T	T
Challenger	ZZCH8468	THE SPACER	$ 360	11.31	T	T	T	T
Challenger	ZZCH8478	6ft TIMBER TRAIL BRIDGE	$ 5,281	148.40	T	T	T	T
Challenger	ZZCH8479	10ft TIMBER TRAIL BRIDGE	$ 6,607	222.30	T	T	T	T
Challenger	ZZCH8480	6ft RIPPLE BRIDGE	$ 3,877	154.04	T	T	T	T
Challenger	ZZCH8486	10ft RIPPLE BRIDGE	$ 5,132	211.02	T	T	T	T
Challenger	ZZCH8496	CASTLE SLITHER SLIDE ENTRY/ SLIDE-A-SIDE W/O TOP PANEL	$ 2,606	120.8	T	T	T	T
Challenger	ZZCH8496S	CASTLE SLITHER SLIDE ENTRY/ SLIDE-A-SIDE W/O TOP PANEL (SM)	$ 2,606	116.5	T	T	T	T
Challenger	ZZCH8497	SLITHER SLIDE ENTRY/EXIT	$ 2,234	83.64	F	F	F	F
Challenger	ZZCH8497S	SLITHER SLIDE ENTRY/EXIT	$ 2,234	80.83	F	F	F	F
Challenger	ZZCH8498	CASTLE WINDOW BARRIER (DECK)	$ 873	31.83	T	T	T	T
Challenger	ZZCH8499	CASTLE TREASURE HUNT (DECK) W/OUT PANEL TOP	$ 1,633	40.92	T	T	T	T
Challenger	ZZCH8500	CASTLE ARCH	$ 1,109	23.60	T	T	T	T
Challenger	ZZCH8506	CASTLE CAP	$ 203	3.35	T	T	T	T
Challenger	ZZCH8507	POST FLAG - CHECKER	$ 498	11.02	T	T	T	T
Challenger	ZZCH8508	POST FLAG W/ CUSTOM GRAPHIC	$ 596	11.02	T	T	T	T
Challenger	ZZCH8509	POST FLAG - SOLID	$ 414	11.02	T	T	T	T
Challenger	ZZCH8510	SLITHER SLIDE ENTRY/EXIT	$ 2,654	92.99	T	T	T	T
Challenger	ZZCH8510S	SLITHER SLIDE ENTRY/EXIT	$ 2,654	90.19	T	T	T	T
Challenger	ZZCH8511	CASTLE SLITHER SLIDE ENTRY/ SLIDE-A-SIDE	$ 3,090	130.4	T	T	T	T
Challenger	ZZCH8511S	CASTLE SLITHER SLIDE ENTRY/ SLIDE-A-SIDE (SM)	$ 3,090	126.1	T	T	T	T
Challenger	ZZCH8516	CASTLE WINDOW BARRIER (DECK)	$ 1,306	41.19	T	T	T	T
Challenger	ZZCH8517	CASTLE WINDOW BARRIER (GROUND	$ 1,070	32.36	T	T	T	T
Challenger	ZZCH8518	CASTLE TREASURE HUNT (DECK)	$ 2,048	50.44	T	T	T	T
Challenger	ZZCH8519	CASTLE TREASURE HUNT (GROUND)	$ 1,780	42.56	T	T	T	T
Challenger	ZZCH8520	CASTLE CLIMBER (72in DECK)	$ 2,890	90.69	T	T	T	T
Challenger	ZZCH8530	DRAWBRIDGE	$ 4,324	183.31	T	T	T	T
Challenger	ZZCH8530S	DRAWBRIDGE (SURFACE MOUNT)	$ 4,324	159.09	T	T	T	T
Challenger	ZZCH8536	WALK THE PLANK	$ 3,974	173.87	T	T	T	T
Challenger	ZZCH8536S	WALK THE PLANK (SURFACE MOUNT)	$ 3,974	149.65	T	T	T	T
Challenger	ZZCH8537	POST FLAG - CROWN	$ 601	12.30	T	T	T	T
Challenger	ZZCH8538	POST FLAG - LION	$ 601	12.30	T	T	T	T
Challenger	ZZCH8539	NAUTICAL JOLLY ROGER FLAG	$ 524	12.34	T	T	T	T
Challenger	ZZCH8540	NAUTICAL CAPTAIN'S WHEEL FLAG	$ 563	12.34	T	T	T	T
Challenger	ZZCH8546	NAUTICAL ANCHOR FLAG	$ 563	12.34	T	T	T	T
Challenger	ZZCH8547	NAUTICAL BOW (48in DK)	$ 9,289	307.60	T	T	T	T
Challenger	ZZCH8547S	NAUTICAL BOW (48in DK) SURF	$ 9,289	295.40	T	T	T	T
Challenger	ZZCH8548	NAUTICAL BOW (36in DK)	$ 9,289	301.00	T	T	T	T
Challenger	ZZCH8548S	NAUTICAL BOW (36in DK) SURF	$ 9,289	288.80	T	T	T	T
Challenger	ZZCH8549	SLITHER SLIDE ENTRY/EXIT	$ 2,234	83.64	T	T	T	T
Challenger	ZZCH8549S	SLITHER SLIDE ENTRY/EXIT	$ 2,234	80.84	T	T	T	T
Challenger	ZZCH8550	PORTHOLE PANEL (NAUTICAL	$ 1,371	40.27	T	T	T	T
Challenger	ZZCH8551	NAUTICAL SLITHER SLIDE ENTRY/ SLIDE-A-SIDE	$ 2,682	120.8	T	T	T	T
Challenger	ZZCH8551S	NAUTICAL SLITHER SLIDE ENTRY/ SLIDE-A-SIDE (SM)	$ 2,682	116.5	T	T	T	T
Challenger	ZZCH8556	BRIG PANEL (NAUTICAL THEME)	$ 891	35.67	T	T	T	T
Challenger	ZZCH8557	CANNON PANEL (NAUTICAL THEME)(DECK LEVEL)	$ 1,605	43.51	T	T	T	T
Challenger	ZZCH8558	CANNON PANEL (NAUTICAL THEME)GROUND LEVEL	$ 1,776	46.25	T	T	T	T
Challenger	ZZCH8559	SUNKEN TREASURE HUNT (DECKMOUNT) (NAUTICAL THEME)	$ 1,798	41.46	T	T	T	T
Challenger	ZZCH8560	SUNKEN TREASURE HUNT (GROUNDLEVEL) (NAUTICAL THEME)	$ 1,950	44.18	T	T	T	T
Challenger	ZZCH8566	NAUTICAL SAIL	$ 2,118	156.53	T	T	T	T
Challenger	ZZCH8566S	NAUTICAL SAIL (SURF MOUNT)	$ 2,118	156.53	T	T	T	T
Challenger	ZZCH8567	STERN CLIMBER	$ 9,430	280.80	T	T	T	T
Challenger	ZZCH8568	BRIG PANEL (NAUTICAL THEME)(GROUND LEVEL)	$ 1,048	38.43	T	T	T	T
Challenger	ZZCH8569	NAUTICAL WALK-THRU PANEL	$ 1,091	29.30	T	T	T	T
Challenger	ZZCH8576	NAUTICAL JOLLY ROGER FLAG(SAIL CONNECTOR)	$ 815	17.29	T	T	T	T
Challenger	ZZCH8577	NAUTICAL CAPTAIN'S WHEEL FLAG(SAIL CONNECTOR)	$ 884	17.29	T	T	T	T
Challenger	ZZCH8578	NAUTICAL ANCHOR FLAG (SAILCONNECTOR)	$ 884	17.29	T	T	T	T
Challenger	ZZCH8579	ACCESSIBLE NAUTICAL STEERINGWHEEL PANEL	$ 1,605	32.69	T	T	T	T
Challenger	ZZCH8586	NAUTICAL CUSTOM FLAG (SAILCONNECTOR)	$ 873	17.29	T	T	T	T
Challenger	ZZCH8588	CUSTOM GRAPHIC FLAG WITH 2	$ 1,441	17.90	T	T	T	T
Challenger	ZZCH8589	CUSTOM GRAPHIC FLAG WITH 1	$ 913	12.95	T	T	T	T
Challenger	ZZCH8597	NAUTICAL BOW W/ STEEL CLIMBER	$ 6,289	319.96	T	T	T	T
Challenger	ZZCH8597S	NAUTICAL BOW W/ STEEL CLIMBER (SM)	$ 6,289	307.56	T	T	T	T
Challenger	ZZCH8598	NAUTICAL STERN BALCONY	$ 3,872	167.49	T	T	T	T
Challenger	ZZCH8606	COZY COCOON - STATIONARY	$ 2,741	169.20	T	T	T	T
Challenger	ZZCH8606S	COZY COCOON - STATIONARY (SM)	$ 2,741	161.50	T	T	T	T
Challenger	ZZCH8816	BEDROCK TRANSFER - 36IN RAIL	$ 8,513	797.46	F	F	F	F
Challenger	ZZCH8817	BEDROCK TRANSFER - 36IN TALL RAIL	$ 9,450	800.06	F	F	F	F
Challenger	ZZCH8818	BEDROCK TRANSFER - 36IN BARRIER	$ 10,192	831.66	F	F	F	F
Challenger	ZZCH8819	BEDROCK TRANSFER - 48IN BARRIER	$ 10,140	916.33	F	F	F	F
Challenger	ZZCH8939	PLAYCUBES TRANSITION CLIMBER	$ 1,244	75.66	T	T	T	T
Challenger	ZZCH9059	36in CSA PERFORATED STAIR	$ 2,245	103.80	T	T	T	F
Challenger	ZZCH9059S	36in CSA PERFORATED STAIR(SURF MOUNT)	$ 2,245	107.80	T	T	T	F
Challenger	ZZCH9069	48in CSA PERFORATED STAIR	$ 2,467	126.60	T	T	T	F
Challenger	ZZCH9069S	48in CSA PERFORATED STAIR(SURF MOUNT)	$ 2,467	130.60	T	T	T	F
Challenger	ZZCH9076	OVAL CRATER WALL	$ 5,870	216.08	T	T	T	T
Challenger	ZZCH9076S	OVAL CRATER WALL	$ 5,870	220.88	T	T	T	T
Challenger	ZZCH9077	OVAL CRATER ARCH	$ 3,134	100.95	T	T	T	T
Challenger	ZZCH9077S	OVAL CRATER ARCH	$ 3,134	105.75	T	T	T	T
Challenger	ZZCH9079	TRI JUNCTION	$ 2,157	89.44	T	T	T	T
Challenger	ZZCH9080	QUAD JUNCTION	$ 2,944	125.48	T	T	T	T
Challenger	ZZCH9086	DUPLEX CLIMBER	$ 4,673	213.47	T	T	T	T
Challenger	ZZCH9086S	DUPLEX CLIMBER	$ 4,673	182.10	T	T	T	T
Challenger	ZZCH9087	THE CROSSOVER	$ 3,839	186.58	T	T	T	T
Challenger	ZZCH9087S	THE CROSSOVER	$ 3,839	176.12	T	T	T	T
Challenger	ZZCH9088	ADVENTURE SLIDE	$ 5,842	347.93	T	T	T	T
Challenger	ZZCH9088S	ADVENTURE SLIDE	$ 5,842	328.73	T	T	T	T

Challenger	ZZCH9089	ADVENTURE SLIDE - RIGHT ARCH	$ 5,853	352.55	T	T	T	T
Challenger	ZZCH9089S	ADVENTURE SLIDE - RIGHT ARCH	$ 5,853	328.12	T	T	T	T
Challenger	ZZCH9090	ADVENTURE SLIDE - LEFT ARCH	$ 5,853	352.55	T	T	T	T
Challenger	ZZCH9090S	ADVENTURE SLIDE - LEFT ARCH	$ 5,853	328.12	T	T	T	T
Challenger	ZZCH9156	COATED STAIRS(18in DECK)	$ 960	38.10	T	T	T	T
Challenger	ZZCH9156S	COATED STAIRS(18in DECK) (SURFACE MOUNT)	$ 960	43.08	T	T	T	T
Challenger	ZZCH9157	COATED STAIRS(24in DECK)	$ 1,518	67.18	T	T	F	T
Challenger	ZZCH9157S	COATED STAIRS(24in DECK) (SURFACE MOUNT)	$ 1,518	71.18	T	T	F	T
Challenger	ZZCH9158	COATED STAIRS(36in DECK)	$ 2,074	91.98	T	T	F	T
Challenger	ZZCH9158S	COATED STAIRS(36in DECK) (SURFACE MOUNT)	$ 2,074	95.98	T	T	F	T
Challenger	ZZCH9159	COATED STAIRS(48in DECK)	$ 2,300	111.18	T	T	F	T
Challenger	ZZCH9159S	COATED STAIRS(48in DECK) (SURFACE MOUNT)	$ 2,300	115.18	T	T	F	T
Challenger	ZZCH9160	COATED LADDER(60in DECK)	$ 2,649	113.72	T	T	T	T
Challenger	ZZCH9160S	COATED LADDER(60in DECK) (SURFACE MOUNT)	$ 2,649	117.52	T	T	T	T
Challenger	ZZCH9166	COATED LADDER(72in DECK)	$ 2,834	132.72	T	T	T	T
Challenger	ZZCH9166S	COATED LADDER(72in DECK) (SURFACE MOUNT)	$ 2,834	136.52	T	T	T	T
Challenger	ZZCH9168	12in ACCESS STEPPED PLATFORM(DECK TO DECK)	$ 1,645	70.28	T	T	T	T
Challenger	ZZCH9170	24in ACCESS STEPPED PLATFORM(DECK TO DECK)	$ 3,144	135.24	T	T	T	T
Challenger	ZZCH9177	36in ACCESS STEPPED PLATFORM(DECK TO DECK)	$ 4,822	217.24	T	T	T	T
Challenger	ZZCH9189	18in ACCESSIBLE STEPPEDPLATFORM (DECK TO DECK)	$ 2,398	103.54	T	T	T	T
Challenger	ZZCH9580	SLIDE-A-SIDE SLIDE - BALCONY & BARRIERS	$ 1,798	102.8	T	T	T	T
Challenger	ZZCH9581	SLIDE-A-SIDE SLIDE - STANDARD BARRIER	$ 1,113	31	T	T	T	T
Challenger	ZZCH9606	PLAYWOOD SINGLE PEAK ROOF	$ 2,572	183.19	T	T	T	T
Challenger	ZZCH9607	PLAYWOOD EXTENDED PEAK ROOF	$ 4,350	316.13	T	T	T	T
Challenger	ZZCH9616	PLAYWOOD SINGLE SLANT ROOF	$ 1,867	142.41	T	T	T	T
Challenger	ZZCH9626	SQUARE PEAK ROOF	$ 5,477	229.25	T	T	T	T
Challenger	ZZCH9627	EXTENDED- SQUARE PEAK ROOF	$ 7,542	318.44	T	T	T	T
Challenger	ZZCH9628	SLANT CORRUGATED ROOF	$ 3,763	233.87	T	T	T	T
Challenger	ZZCH9698	16ft SHADE CANOPY	$ 3,872	17.71	T	T	T	T
Challenger	ZZCH9699	20ft SHADE CANOPY	$ 4,597	23.21	T	T	T	T
Challenger	ZZCH9708	MODULAR HYPAR	$ 6,530	186.35	T	T	T	T
Challenger	ZZCH9726	CH SQUARE HAT POST BRACES	$ 1,524	74.74	T	T	T	T
Challenger	ZZCH9727	CH HEX HAT POST BRACES	$ 2,288	112.10	T	T	T	T
Challenger	ZZCH9806	SMALL TREE TOPPER	$ 400	14.06	T	T	T	T
Challenger	ZZCH9807	LARGE TREE TOPPER	$ 688	30.03	T	T	T	T
Challenger	ZZCH9809	PALM TREE TOPPER	$ 458	14.33	F	F	F	F
Challenger	ZZCH9816	CAMBER 1/2 SQUARE ROOF	$ 1,125	33.47	T	T	T	T
Challenger	ZZCH9817	CAMBER 1/2 SQUARE ROOFADD ON	$ 1,011	31.61	T	T	T	T
Challenger	ZZCH9818	CAMBER HALF HEX ROOF	$ 3,931	113.47	T	T	T	F
Challenger	ZZCH9819	CAMBER HEX ROOF	$ 7,381	217.90	T	T	T	F
Challenger	ZZCH9820	CAMBER OPEN HEX ROOF	$ 4,167	119.49	T	T	F	F
Challenger	ZZCH9828	CARNIVAL ROOF - SMALL PERF(SQUARE)	$ 1,790	116.18	T	T	T	T
Challenger	ZZCH9837	CARNIVAL ROOF - SMALL PERF(EXTENDED SQUARE)	$ 3,243	164.94	T	T	T	F
Challenger	ZZCH9841	PINE TREE POST TOPPER	$ 425	23.1	T	T	T	T
Challenger	ZZCH9842	SOCCER BALL POST TOPPER	$ 343	23.7	T	T	T	T
Challenger	ZZCH9843	BASEBALL POST TOPPER	$ 165	9	T	T	T	T
Challenger	ZZCH9844	HOCKEY STICK POST TOPPER	$ 1,583	54.5	T	T	T	T
Challenger	ZZCH9846	CABANA ROOF	$ 1,616	76.05	T	T	T	T
Challenger	ZZCH9847	SMALL LOLLITOPS	$ 382	15.04	T	T	T	T
Challenger	ZZCH9848	MEDIUM LOLLITOPS	$ 607	29.04	T	T	T	T
Challenger	ZZCH9849	LARGE LOLLITOPS	$ 960	50.04	T	T	T	T
Challenger	ZZCH9856	CARNIVAL ROOF SQUARE CAP	$ 210	4.61	T	T	T	T
Challenger	ZZCH9858	CH HEX CABANA ROOF	$ 3,446	194.15	T	T	T	T
Challenger	ZZCH9859	THE LOLLICAP	$ 174	2.53	T	T	T	T
Challenger	ZZCH9867	NUVO ROOF	$ 2,763	84.93	T	T	T	T
Challenger	ZZCH9868	NUVO SWIRL ROOF	$ 1,790	80.33	T	T	T	T
Challenger	ZZCH9887	CARNIVAL ROOF - SMALLPERF (HEX)	$ 2,751	158.93	T	T	T	T
Challenger	ZZCH9896	CARNIVAL ROOF - SMALLPERF (EXTENDED HEX)	$ 4,586	260.44	T	T	T	T
Challenger	ZZCH9898	CARNIVAL ROOF HEX CAP	$ 465	4.60	T	T	T	T
Challenger	ZZCH9906	CARNIVAL ROOF EXTENDEDHEX CAP	$ 480	4.96	T	T	T	T

Category	Part Number	DESCRIPTION	List Price ($ USD)	Weight (lbs)	ASTM Certified	CPSC Compliant	CSA Certified	EN Certified
Playmaker	ZZPM0006	5in OD X 96in STEEL POST W/ RIVETED CAP	$ 382	54.21	T	T	T	T
Playmaker	ZZPM0006S	5in OD X 60in STEEL POST CAP (SURFACE MOUNT)	$ 382	44.51	T	T	T	T
Playmaker	ZZPM0008	5in OD X 108in STEEL POST W/ RIVETED CAP	$ 410	60.51	T	T	T	T
Playmaker	ZZPM0008GZ	5in OD X 108in POST W/ (GROUND ZERO)	$ 410	60.61	T	T	T	T
Playmaker	ZZPM0008S	5in OD X 72in STEEL POST W/ CAP (SURFACE MOUNT)	$ 410	50.51	T	T	T	F
Playmaker	ZZPM0016	5in OD X 120in STEEL POST W/ RIVETED CAP	$ 436	67.11	T	T	T	T
Playmaker	ZZPM0016S	5in OD X 84in STEEL POST W/ CAP (SURFACE MOUNT)	$ 436	56.61	T	T	T	T
Playmaker	ZZPM0017	5in OD X 120in STEEL POST W/O CAP	$ 356	65.71	T	T	T	T
Playmaker	ZZPM0017S	5in OD X 84in STEEL POST W/O CAP (SURFACE MOUNT)	$ 356	55.71	T	T	T	T
Playmaker	ZZPM0026	5in OD X 132in STEEL POST W/ RIVETED CAP	$ 458	74.21	T	T	T	T
Playmaker	ZZPM0026S	5in OD X 96in STEEL POST W/ CAP (SURFACE MOUNT)	$ 458	64.71	T	T	T	T
Playmaker	ZZPM0027	5in OD X 132in STEEL POST W/O CAP	$ 388	76.41	T	T	T	T
Playmaker	ZZPM0027S	5in OD X 96in STEEL POST W/O CAP (SURFACE MOUNT)	$ 388	63.91	T	T	T	T
Playmaker	ZZPM0036	5in OD X 144in STEEL POST W/ RIVETED CAP	$ 498	80.91	T	T	T	T
Playmaker	ZZPM0036GZ	5in OD X 144in STEEL POST (GROUND ZERO)	$ 498	80.41	T	T	T	T
Playmaker	ZZPM0036S	5in OD X 108in STEEL POST W/ CAP (SURFACE MOUNT)	$ 498	72.11	T	T	T	T
Playmaker	ZZPM0037	5in OD X 144in STEEL POST W/O CAP	$ 414	78.81	T	T	T	T
Playmaker	ZZPM0037GZ	5in x 144in GROUND ZERO POST - NO CAP	$ 414	82.51	T	T	T	T
Playmaker	ZZPM0037S	5in OD X 108in STEEL POST W/O CAP (SURFACE MOUNT)	$ 414	71.01	T	T	T	T
Playmaker	ZZPM0046	5in OD X 156in STEEL POST W/ RIVETED CAP	$ 575	87.71	T	T	T	T
Playmaker	ZZPM0046GZ	5in x 156in GROUND ZERO POST - NO CAP	$ 579	89.44	T	T	T	T
Playmaker	ZZPM0046S	5in OD X 120in STEEL POST W/ CAP (SURFACE MOUNT)	$ 575	76.81	T	T	T	T
Playmaker	ZZPM0047	5in OD X 156in STEEL POST W/O CAP	$ 491	85.31	T	T	T	T
Playmaker	ZZPM0047GZ	5in OD X 156in STEEL POST W/O CAP (GROUND ZERO)	$ 491	90.43	T	T	T	T
Playmaker	ZZPM0047S	5in OD X 120in STEEL POST W/O CAP (SURFACE MOUNT)	$ 491	75.91	T	T	T	T
Playmaker	ZZPM0056	5in OD X 168in STEEL POST W/ RIVETED CAP	$ 601	92.51	T	T	T	T
Playmaker	ZZPM0056GZ	5in OD X 168in STEEL POST W/ CAP (GROUND ZERO)	$ 601	97.01	T	T	T	T
Playmaker	ZZPM0056S	5in OD X 132in STEEL POST W/ CAP (SURFACE MOUNT)	$ 601	85.11	T	T	T	T
Playmaker	ZZPM0057	5in OD X 168in STEEL POST W/O CAP	$ 519	91.81	T	T	T	T
Playmaker	ZZPM0057GZ	5in OD X 168in STEEL POST W/O CAP (GROUND ZERO)	$ 519	96.01	T	T	T	T
Playmaker	ZZPM0057S	5in OD X 132in STEEL POST W/O CAP (SURFACE MOUNT)	$ 519	84.21	T	T	T	T
Playmaker	ZZPM0066	5in OD X 180in STEEL POST W/ RIVETED CAP	$ 640	100.81	T	T	T	T
Playmaker	ZZPM0066GZ	5in x 180in GROUNDZERO POST	$ 644	104.18	T	T	T	T
Playmaker	ZZPM0066S	5in OD X 144in STEEL POST W/ CAP (SURFACE MOUNT)	$ 640	89.61	T	T	T	T
Playmaker	ZZPM0067	5in OD X 180in STEEL POST W/O CAP	$ 553	99.91	T	T	T	T
Playmaker	ZZPM0067S	5in OD x 144in STEEL POST W/O CAP (SURFACE MOUNT)	$ 553	88.31	T	T	T	T
Playmaker	ZZPM0078	5in OD x 205in STEEL POST W/RIVETED CAP	$ 698	115.21	T	T	T	T
Playmaker	ZZPM0078S	5in OD x 171in STEEL POST W/ CAP (SURFACE MOUNT)	$ 698	107.01	T	T	T	T
Playmaker	ZZPM0079	5in OD x 205in STEEL POST W/O CAP	$ 618	113.71	T	T	T	T
Playmaker	ZZPM0079S	5in OD x 171in STEEL POST W/O CAP (SURFACE MOUNT)	$ 618	106.11	T	T	T	T
Playmaker	ZZPM0128	5in OD x 192in STEEL POST W/RIVETED CAP	$ 662	106.31	T	T	T	T
Playmaker	ZZPM0128S	5in OD x 156in STEEL POST W/RIVETED CAP (SURFACE MOUNT)	$ 662	92.01	T	T	T	T
Playmaker	ZZPM0129	5in OD x 192in STEEL POST W/O CAP	$ 585	105.41	T	T	T	T
Playmaker	ZZPM0129S	5in OD x 156in STEEL POST W/O CAP (SURFACE MOUNT)	$ 585	95.01	T	T	T	T
Playmaker	ZZPM0136	5in OD x 96in STEEL POST W/O CAP	$ 295	52.61	T	T	T	T
Playmaker	ZZPM0136S	5in OD x 64in STEEL POST W/O CAP (SURFACE MOUNT)	$ 295	43.61	T	T	T	T
Playmaker	ZZPM0138	5in OD x 108in STEEL POST W/O CAP	$ 327	60.51	T	T	T	T
Playmaker	ZZPM0138S	5in OD x 72in STEEL POST W/O CAP (SURFACE MOUNT)	$ 327	49.61	T	T	T	T
Playmaker	ZZPM0149	STEP AROUND	$ 436	8.39	T	T	T	T
Playmaker	ZZPM0218	5in OD x 92in SWAGED STEEL POST	$ 305	44.71	T	T	T	T
Playmaker	ZZPM0218S	5in OD x 56in SWAGED STEEL POST (SURFACE MOUNT)	$ 305	42.11	T	T	T	T
Playmaker	ZZPM0219	5in OD x 104in SWAGED STEEL POST	$ 334	39.11	T	T	T	T
Playmaker	ZZPM0219S	5in OD x 68in SWAGED STEEL POST (SURFACE MOUNT)	$ 334	46.41	T	T	T	T
Playmaker	ZZPM0226	5in OD x 116in SWAGED STEEL POST	$ 360	53.41	T	T	T	T
Playmaker	ZZPM0226S	5in OD x 80in SWAGED STEEL POST (SURFACE MOUNT)	$ 360	50.81	T	T	T	T
Playmaker	ZZPM0227	5in OD x 128in SWAGED STEEL POST	$ 393	57.81	T	T	T	T
Playmaker	ZZPM0227S	5in OD x 92in SWAGED STEEL POST (SURFACE MOUNT)	$ 393	55.21	T	T	T	T
Playmaker	ZZPM0228	5in OD x 140in SWAGED STEEL POST	$ 426	62.21	T	T	T	T
Playmaker	ZZPM0228S	5in OD x 104in SWAGED STEEL POST (SURFACE MOUNT)	$ 426	63.61	T	T	T	T
Playmaker	ZZPM0229	5in OD x 152in SWAGED STEEL POST	$ 498	67.51	T	T	T	T
Playmaker	ZZPM0229S	5in OD x 116in SWAGED STEEL POST (SURFACE MOUNT)	$ 498	63.91	T	T	T	T
Playmaker	ZZPM0236	5in OD x 164in SWAGED STEEL POST	$ 535	91.81	T	T	T	T
Playmaker	ZZPM0236GZ	5in OD x 164in SWAGED STEEL GROUND ZERO POST	$ 535	94.61	T	T	T	T
Playmaker	ZZPM0236S	5in OD x 128in SWAGED STEEL POST (SURFACE MOUNT)	$ 535	80.21	T	T	T	T
Playmaker	ZZPM0238	5in OD x 176in SWAGED STEEL POST	$ 557	103.91	T	T	T	T
Playmaker	ZZPM0238S	5in OD x 140in SWAGED STEEL POST (SURFACE MOUNT)	$ 557	85.41	T	T	T	T
Playmaker	ZZPM0247	5in OD x 201in SWAGED STEEL POST	$ 622	118.71	T	T	T	T
Playmaker	ZZPM0247S	5in OD x 165in SWAGED STEEL POST (SURFACE MOUNT)	$ 622	102.61	T	T	T	T
Playmaker	ZZPM0266	5in OD x 217in STEEL POST W/CAP	$ 819	114.01	T	T	T	T
Playmaker	ZZPM0266S	5in OD x 181in STEEL POST W/CAP (SURFACE MOUNT)	$ 819	106.01	T	T	T	T
Playmaker	ZZPM0267	5in OD x 217in STEEL POST W/O CAP	$ 688	113.01	T	T	T	T
Playmaker	ZZPM0267S	5in OD x 181in STEEL POST W/O CAP (SURFACE MOUNT)	$ 688	105.01	T	T	T	T
Playmaker	ZZPM0268	5in OD x 229in STEEL POST W/CAP	$ 764	121.01	T	T	T	T
Playmaker	ZZPM0268S	5in OD x 193in STEEL POST W/CAP (SURFACE MOUNT)	$ 764	112.01	T	T	T	T
Playmaker	ZZPM0269	5in OD x 229in STEEL POST W/O CAP	$ 676	120.01	T	T	T	T
Playmaker	ZZPM0269S	5in OD x 193in STEEL POST W/O CAP (SURFACE MOUNT)	$ 676	111.01	T	T	T	T
Playmaker	ZZPM0277	5in OD x 213in SWAGED STEEL POST	$ 684	113.01	T	T	T	T
Playmaker	ZZPM0277S	5in OD x 177in SWAGED STEEL POST (SURFACE MOUNT)	$ 684	105.01	T	T	T	T
Playmaker	ZZPM0287	5in OD x 188in SWAGED STEEL POST	$ 601	107.48	T	T	T	T
Playmaker	ZZPM0287S	5in OD x 152in SWAGED STEEL SURFACE MOUNT POST	$ 601	98.35	T	T	T	T
Playmaker	ZZPM0288	5in OD x 222in SWAGED STEEL POST	$ 706	126.95	T	T	T	T
Playmaker	ZZPM0288S	5in OD x 186in SWAGED STEEL SURFACE MOUNT POST	$ 706	117.82	T	T	T	T
Playmaker	ZZPM0289	5in OD x 234in SWAGED STEEL POST	$ 698	133.88	T	T	T	T
Playmaker	ZZPM0289S	5in OD x 198in SWAGED STEEL SURFACE MOUNT POST	$ 698	124.53	T	T	T	T
Playmaker	ZZPM0296	POST W/ LADDER CLIMBER (12in OR 24in DECK)	$ 688	66.01	T	T	T	T
Playmaker	ZZPM0296S	POST W/ LADDER CLIMBER (12in OR 24in DECK) (SM)	$ 688	56.11	T	T	T	F
Playmaker	ZZPM0297	POST W/ LADDER CLIMBER (36in OR 48in DECK)	$ 873	74.81	T	T	T	T
Playmaker	ZZPM0297S	POST W/ LADDER CLIMBER (36in OR 48in DECK) (SM)	$ 873	64.91	T	T	T	F
Playmaker	ZZPM0336	5in OD CUSTOM GRAPHIC POST TOP	$ 1,667	28.53	T	T	T	T

Playmaker	ZZPM0357	5in x 84in STEEL POST w/CAP	$ 382	53.03	T	T	T	T
Playmaker	ZZPM0357S	5in x 48in STEEL SURFACE MOUNT POST w/CAP	$ 382	39.83	T	T	T	T
Playmaker	ZZPM0358	PM CUSTOM GRAPHIC ARCH	$ 3,894	82.74	T	T	T	T
Playmaker	ZZPM0359	CUSTOM POST SIGN (PM)	$ 3,283	29.00	T	T	T	T
Playmaker	ZZPM0366	1ft POST EXTENSION FOOTER & CLAMP SUPPORT	$ 192	13.76	T	T	T	T
Playmaker	ZZPM0367	2ft POST EXTENSION FOOTER & CLAMP SUPPORT	$ 207	20.58	T	T	T	T
Playmaker	ZZPM0368	3ft POST EXTENSION FOOTER & CLAMP SUPPORT	$ 214	27.50	T	T	T	T
Playmaker	ZZPM0385	5IN OD X 162IN SHADE POST (24IN & 36IN DECKS)	$ 480	92.90	T	T	T	T
Playmaker	ZZPM0386	5in OD x 186in LARGE SHADE HAT POST- (48in & 60in DECK)	$ 596	106.16	T	T	T	T
Playmaker	ZZPM0387	5in OD x 210in LARGE SHADE HAT POST- (72in & 84in DECK)	$ 655	120.02	T	T	T	T
Playmaker	ZZPM0388	5in OD x 234in LARGE SHADE HAT POST- (96in & 108in DECK)	$ 710	133.66	T	T	T	T
Playmaker	ZZPM0391GZ	5IN OD X 358IN STEEL POST W/ RIVETED CAP	$ 939	204.20	T	T	T	T
Playmaker	ZZPM0391S	5IN OD X 308IN SURFACE MOUNT STEEL POST W/ CAP	$ 939	177.90	T	T	T	T
Playmaker	ZZPM0392GZ	5IN OD X 346IN STELE POST W/ RIVETED CAP	$ 939	195.90	T	T	T	T
Playmaker	ZZPM0392S	5IN OD X 296IN SURFACE MOUNT STEEL POST W/ CAP	$ 939	173.10	T	T	T	T
Playmaker	ZZPM0393GZ	5IN OD X 334IN STEEL POST W/ RIVETED CAP	$ 939	187.10	T	T	T	T
Playmaker	ZZPM0393S	5IN OD X 284IN SURFACE MOUNT STEEL POST W/ CAP	$ 939	166.30	T	T	T	T
Playmaker	ZZPM0394GZ	5IN OD X 322IN STEEL POST W/ RIVETED CAP	$ 939	182.10	T	T	T	T
Playmaker	ZZPM0394S	5IN OD X 272IN SURFACE MOUNT STEEL POST W/ CAP	$ 939	161.10	T	T	T	T
Playmaker	ZZPM0395GZ	5IN OD X 310IN STEEL POST W/ RIVETED CAP	$ 939	177.30	T	T	T	T
Playmaker	ZZPM0395S	5IN OD X 260IN SURFACE MOUNT STEEL POST W/ CAP	$ 939	154.40	T	T	T	T
Playmaker	ZZPM0396GZ	5IN OD X 298IN STEEL POST W/ RIVETED CAP	$ 829	170.50	T	T	T	T
Playmaker	ZZPM0396S	5IN OD X 248IN SURFACE MOUNT STEEL POST W/ CAP	$ 829	147.30	T	T	T	T
Playmaker	ZZPM0397GZ	5IN OD X 286IN STEEL POST W/ RIVETED CAP	$ 803	163.50	T	T	T	T
Playmaker	ZZPM0397S	5IN OD X 326IN SURFACE MOUNT STEEL POST W/ CAP	$ 803	131.00	T	T	T	T
Playmaker	ZZPM0398	5IN OD X 262IN STEEL POST W/ RIVETED CAP	$ 738	132.00	T	T	T	T
Playmaker	ZZPM0398S	5IN OD X 224IN SURFACE MOUNT STEEL POST W/ CAP	$ 738	124.40	T	T	T	T
Playmaker	ZZPM0399	5IN OD X 250IN STEEL POST W/ RIVETED CAP	$ 710	127.60	T	T	T	T
Playmaker	ZZPM0399S	5IN OD X 212IN SURFACE MOUNT STEEL POST W/ CAP	$ 710	124.10	T	T	T	T
Playmaker	ZZPM0401	5IN OD X 7GA X 161IN SHADE POST (24IN & 36IN DECK)	$ 607	136.4	T	T	T	T
Playmaker	ZZPM0402	5IN OD X 7GA X 185IN SHADE POST (48IN & 60IN DECK)	$ 640	157.3	T	T	T	T
Playmaker	ZZPM0403	5IN OD X 7GA X 209IN SHADE POST (72IN & 84IN DECK)	$ 710	178.2	T	T	T	T
Playmaker	ZZPM0404	5IN OD X 7GA X 233IN SHADE POST (96IN & 108IN DECK)	$ 775	198	T	T	T	T
Playmaker	ZZPM0599	WHEELCHAIR CURB FOR HALF PANELS	$ 142	7.87	T	F	T	T
Playmaker	ZZPM0616	SQUARE COATED DECK ASSEMBLY	$ 1,572	90.36	T	T	T	T
Playmaker	ZZPM0617	TRIANGULAR COATED DECK ASSEMBLY	$ 1,240	46.40	T	T	T	T
Playmaker	ZZPM0618	1/2 HEX COATED DECK ASSEMBLY	$ 2,195	111.82	T	T	T	T
Playmaker	ZZPM0619	HEX COATED DECK ASSEMBLY	$ 3,741	228.72	T	T	T	T
Playmaker	ZZPM0629	LONG COATED DECK ASSEMBLY	$ 2,664	176.99	T	T	T	T
Playmaker	ZZPM0637	HALF HEX W/OUT CENTER POST	$ 1,400	116	T	T	T	T
Playmaker	ZZPM0639	45 DEGREE TRI COATED DECK ASSEMBLY	$ 1,000	57.90	T	T	T	T
Playmaker	ZZPM0657	CRE8PLAY - MEDIUM CADRE	$ 98,127	6000.00	F	F	F	F
Playmaker	ZZPM0676	PM PLAYWOOD SQUARE DECK	$ 2,767	186.77	T	T	T	T
Playmaker	ZZPM0677	PM PLAYWOOD HEX DECK	$ 5,532	475.91	T	T	T	T
Playmaker	ZZPM0683	NUVO - 36IN TRANSFER STATION	$ 3,516	273.37	T	T	T	T
Playmaker	ZZPM0683S	NUVO - 36IN TRANSFER STATION (SM)	$ 3,516	252.38	T	T	T	T
Playmaker	ZZPM0684	NUVO - 48IN TRANSFER STATION	$ 4,462	389.4	T	T	T	T
Playmaker	ZZPM0684S	NUVO - 48IN TRANSFER STATION (SM)	$ 4,462	368.4	T	T	T	T
Playmaker	ZZPM0820	12in DECK STEEL FILLER POST	$ 360	25.93	T	T	T	T
Playmaker	ZZPM0820S	12in DECK STEEL FILLER POST	$ 360	21.64	T	T	T	T
Playmaker	ZZPM0830	18in DECK STEEL FILLER POST	$ 349	28.68	T	T	T	T
Playmaker	ZZPM0830S	18in DECK STEEL FILLER POST	$ 349	24.39	T	T	T	T
Playmaker	ZZPM0840	24in DECK STEEL FILLER POST	$ 388	31.32	T	T	T	T
Playmaker	ZZPM0840S	24in DECK STEEL FILLER POST	$ 388	27.14	T	T	T	T
Playmaker	ZZPM0850	30in DECK STEEL FILLER POST	$ 393	34.07	T	T	T	T
Playmaker	ZZPM0850S	30in DECK STEEL FILLER POST	$ 393	29.89	T	T	T	T
Playmaker	ZZPM0860	36in DECK STEEL FILLER POST	$ 404	36.82	T	T	T	T
Playmaker	ZZPM0860S	36in DECK STEEL FILLER POST	$ 404	32.64	T	T	T	T
Playmaker	ZZPM0870	48in DECK STEEL FILLER POST	$ 422	42.32	T	T	T	T
Playmaker	ZZPM0870S	48in DECK STEEL FILLER POST	$ 422	38.14	T	T	T	T
Playmaker	ZZPM0880	60in DECK STEEL FILLER POST	$ 498	47.82	T	T	T	T
Playmaker	ZZPM0880S	60in DECK STEEL FILLER POST	$ 498	43.53	T	T	T	T
Playmaker	ZZPM0890	72in DECK STEEL FILLER POST	$ 513	53.21	T	T	T	T
Playmaker	ZZPM0890S	72in DECK STEEL FILLER POST	$ 513	49.03	T	T	T	T
Playmaker	ZZPM0891	96IN DECK STEEL FILLER POST	$ 470	79.7	T	T	T	T
Playmaker	ZZPM0891S	96IN DECK STEEL FILLER POST (SM)	$ 470	71.4	T	T	T	T
Playmaker	ZZPM1032	PLAYHILLS DECK ACCESS 8FT	$ 2,675	158.5	T	T	T	T
Playmaker	ZZPM1059	DENALI NET BRIDGE (4M NET TO 48IN DECK)	$ 10,446	79.42	T	T	T	T
Playmaker	ZZPM1374	TRIPPPLE RACER SLIDE	$ 9,529	767.03	T	T	T	T
Playmaker	ZZPM1374S	TRIPPPLE RACER SLIDE (SURFACE MOUNT)	$ 9,529	758.63	T	T	T	T
Playmaker	ZZPM2006	TRANSFER STATION (36in DECK)	$ 2,038	151.24	T	T	T	T
Playmaker	ZZPM2006S	TRANSFER STATION (36in DECK) (SURFACE MOUNT)	$ 2,038	147.34	T	T	T	T
Playmaker	ZZPM2007	TRANSFER STATION w/TALL GUARDRAIL (36in DECK)	$ 2,105	155.24	T	T	T	T
Playmaker	ZZPM2007S	TRANSFER STATION w/TALL GUARDRAIL (36in DECK)(SURF MNT	$ 2,105	151.34	T	T	T	T
Playmaker	ZZPM2008	TRANSFER STATION w/BARRIERS (36in DECK)	$ 3,067	204.88	T	T	T	T
Playmaker	ZZPM2008S	TRANSFER STATION w/BARRIERS (36in DECK)(SURFACE MOUNT)	$ 3,067	200.98	T	T	T	T
Playmaker	ZZPM2027	TRANSFER STATION (48in DECK)	$ 3,973	287.44	T	T	T	T
Playmaker	ZZPM2027S	TRANSFER STATION (48in DECK) (SURFACE MOUNT)	$ 3,973	283.54	T	T	T	T
Playmaker	ZZPM2110	POST CAP	$ 50	0.93	T	T	T	T
Playmaker	ZZPM2196	5in OD DOUBLE DECK HANGER	$ 600	2.25	T	T	T	F
Playmaker	ZZPM2324	INFILL PANEL TO TRIPPPLE RACER SLIDE	$ 317	15.85	T	T	T	F
Playmaker	ZZPM2510	6in DECK TO DECK KICK PLATE	$ 148	8.05	T	T	T	T
Playmaker	ZZPM2516	6in ENTRY SUPPORT BRACKET KICK PLATE	$ 275	6.67	T	T	T	T
Playmaker	ZZPM2517	6in 45 DEGREE TRI DECK KICK PLATE	$ 385	8.99	T	T	T	T
Playmaker	ZZPM2530	12in DECK TO DECK KICK PLATE	$ 164	11.95	T	T	T	T
Playmaker	ZZPM2536	12in ENTRY SUPPORT BRACKET KICK PLATE	$ 295	11.67	T	T	T	T
Playmaker	ZZPM2537	12in 45 DEGREE TRI DECK KICK PLATE	$ 192	15.49	T	T	T	T
Playmaker	ZZPM2658	GLIDE SLIDE (60in DECK)	$ 2,682	147.29	T	T	T	T
Playmaker	ZZPM2658S	GLIDE SLIDE (60in DECK) (SURFACE MOUNT)	$ 2,682	144.50	T	T	T	T
Playmaker	ZZPM2696	GLIDE SLIDE (72in DECK)	$ 3,003	163.44	T	T	T	T
Playmaker	ZZPM2696S	GLIDE SLIDE (72in DECK) (SURFACE MOUNT)	$ 3,003	160.64	T	T	T	T

Playmaker	ZZPM2714	360 DEG STAINLESS STEEL SPIRAL SLIDE	$ 21,720	612.40	T	T	T	F
Playmaker	ZZPM2714S	360 DEG STAINLESS STEEL SPIRAL SLIDE (SM)	$ 21,720	597.80	T	T	T	F
Playmaker	ZZPM2727	TWIST AND SHOUT (48in DECK)	$ 2,747	185.20	T	T	T	T
Playmaker	ZZPM2727S	TWIST AND SHOUT (48in DECK) (SURFACE MOUNT)	$ 2,747	179.60	T	T	T	T
Playmaker	ZZPM2737	RUMBLE SEAT (60in DECK)	$ 3,184	203.20	T	T	T	T
Playmaker	ZZPM2737S	RUMBLE SEAT (60in DECK) (SURFACE MOUNT)	$ 3,184	197.60	T	T	T	T
Playmaker	ZZPM2805	ENTRY SUPPORT BRACKET	$ 323	16.94	T	T	T	T
Playmaker	ZZPM2806	24in STEP-UP BRACKET	$ 694	39.60	T	T	T	T
Playmaker	ZZPM2807	18in STEP-UP BRACKET	$ 891	31.10	T	T	T	T
Playmaker	ZZPM2808	12in STEP-UP BRACKET	$ 629	16.60	T	T	T	T
Playmaker	ZZPM2809	6in STEP-UP BRACKET	$ 519	19.60	T	T	T	T
Playmaker	ZZPM2906	STAINLESS STEEL SLIDE - 96IN DECK	$ 13,268	217.90	T	T	T	T
Playmaker	ZZPM2906S	STAINLESS STEEL SLIDE - 96IN DECK (SM)	$ 13,268	204.15	T	T	T	T
Playmaker	ZZPM2907	STAINLESS STEEL SLIDE - 72IN DECK	$ 11,640	186.00	T	T	T	T
Playmaker	ZZPM2907S	STAINLESS STEEL SLIDE - 72IN DECK (SM)	$ 11,640	172.25	T	T	T	T
Playmaker	ZZPM2908	STAINLESS STEEL SLIDE - 60IN DECK	$ 9,845	165.10	T	T	T	T
Playmaker	ZZPM2908S	STAINLESS STEEL SLIDE - 60IN DECK (SM)	$ 9,845	151.35	T	T	T	T
Playmaker	ZZPM2909	STAINLESS STEEL SLIDE - 48IN DECK	$ 9,129	145.30	T	T	T	T
Playmaker	ZZPM2909S	STAINLESS STEEL SLIDE - 48IN DECK (SM)	$ 9,129	131.55	T	T	T	T
Playmaker	ZZPM2916	STAINLESS STEEL SLIDE - 36IN DECK	$ 7,585	129.90	T	T	T	T
Playmaker	ZZPM2916S	STAINLESS STEEL SLIDE - 36IN DECK (SM)	$ 7,585	116.15	T	T	T	T
Playmaker	ZZPM3002	60IN DECK SPAN TUBE SLIDE ENTRANCE/EXIT	$ 2,529	188.90	T	T	T	T
Playmaker	ZZPM3002S	60IN DECK SPAN TUBE SLIDE ENTRANCE/EXIT (SM)	$ 2,529	186.10	T	T	T	T
Playmaker	ZZPM3004	CONTAINED TUBE SLIDE ENTRY/EXIT	$ 2,824	188.50	T	T	T	T
Playmaker	ZZPM3004S	CONTAINED TUBE SLIDE ENTRY/EXIT (SM)	$ 2,824	185.70	T	T	T	T
Playmaker	ZZPM3005	CONTAINED TUBE SLIDE ENTRY/EXIT W/ LONG RUNOUT (EN)	$ 4,685	210.80	T	T	T	T
Playmaker	ZZPM3005S	CONTAINED TUBE SLIDE ENTRY/EXIT W/ LONG RUNOUT (EN) (SM)	$ 4,685	212.60	T	T	T	T
Playmaker	ZZPM3006	30in ROUND TUBE SLIDE ENTRANCE/EXIT	$ 3,479	155.30	T	T	T	T
Playmaker	ZZPM3006S	30in ROUND TUBE SLIDE ENTRANCE/EXIT (SURFACE MOUNT)	$ 3,479	152.50	T	T	T	T
Playmaker	ZZPM3106	WIDE GLIDE SLIDE (36in DECK)	$ 2,326	117.50	T	T	T	T
Playmaker	ZZPM3106S	WIDE GLIDE SLIDE (36in DECK) (SURFACE MOUNT)	$ 2,326	114.00	T	T	T	T
Playmaker	ZZPM3126	GLIDE SLIDE (48in DECK)	$ 2,420	131.54	T	T	T	T
Playmaker	ZZPM3126S	GLIDE SLIDE (48in DECK) (SURFACE MOUNT)	$ 2,420	128.74	T	T	T	T
Playmaker	ZZPM3127	GLIDE SLIDE (36in DECK)	$ 1,965	111.54	T	T	T	T
Playmaker	ZZPM3127S	GLIDE SLIDE (36in DECK) (SURFACE MOUNT)	$ 1,965	108.74	T	T	T	T
Playmaker	ZZPM3128	GLIDE SLIDE (30in & 24in DECK)	$ 1,907	112.54	T	T	T	T
Playmaker	ZZPM3128S	GLIDE SLIDE (24in DECK) (SURFACE MOUNT)	$ 1,907	109.74	T	F	T	F
Playmaker	ZZPM3129	90 DEGREE GLIDE SLIDE (36in DECK)	$ 2,136	108.54	T	T	T	T
Playmaker	ZZPM3129S	90 DEGREE GLIDE SLIDE (36in DECK) (SURFACE MOUNT)	$ 2,136	105.74	T	T	T	T
Playmaker	ZZPM3185	NATURE SLITHER SLIDE ENTRY/ SLIDE-A-SIDE	$ 2,922	133.20	T	T	T	T
Playmaker	ZZPM3185S	NATURE SLITHER SLIDE ENTRY/ SLIDE-A-SIDE (SM)	$ 2,922	128.90	T	T	T	T
Playmaker	ZZPM3185SE	NATURE SLITHER SLIDE ENTRY/ SLIDE-A-SIDE (SM)	$ 3,172	123.40	T	T	T	T
Playmaker	ZZPM3186	NATURE SLITHER SLIDE ENTRY/ EXIT	$ 2,501	97.89	T	T	T	T
Playmaker	ZZPM3186S	NATURE SLITHER SLIDE ENTRY/ EXIT SURF MOUNT	$ 2,501	95.10	T	T	T	T
Playmaker	ZZPM3205	SLITHER SLIDE ENTRY/ SLIDE-A-SIDE	$ 2,725	132.10	T	T	T	T
Playmaker	ZZPM3205S	SLITHER SLIDE ENTRY/ SLIDE-A-SIDE (SM)	$ 2,725	127.70	T	T	T	T
Playmaker	ZZPM3205SE	SLITHER SLIDE ENTRY/ SLIDE-A-SIDE (SM)	$ 2,975	122.20	T	T	T	T
Playmaker	ZZPM3206	SLITHER SLIDE 2.0 ENTRANCE & EXIT	$ 2,249	97.18	T	T	T	T
Playmaker	ZZPM3206S	SLITHER SLIDE 2.0 ENTRANCE & EXIT (SURFACE MOUNT)	$ 2,249	94.38	T	T	T	T
Playmaker	ZZPM3215	SLITHER SLIDE BALCONY/ SLIDE-A-SIDE	$ 3,931	201.30	T	T	T	T
Playmaker	ZZPM3215S	SLITHER SLIDE BALCONY/ SLIDE-A-SIDE (SM)	$ 3,931	197.00	T	T	T	T
Playmaker	ZZPM3215SE	SLITHER SLIDE BALCONY/ SLIDE-A-SIDE (SM)	$ 4,181	191.50	T	T	T	T
Playmaker	ZZPM3216	SLITHER SLIDE 2.0 BALCONY ENTRY/EXIT	$ 3,440	166.60	T	T	T	T
Playmaker	ZZPM3216S	SLITHER SLIDE 2.0 BALCONY ENTRY/EXIT (SURFACE MOUNT)	$ 3,440	163.80	T	T	T	T
Playmaker	ZZPM3236	ZIGZAG SLIDE (60in DECK)	$ 2,715	168.51	T	T	T	T
Playmaker	ZZPM3236S	ZIGZAG SLIDE (60in DECK) (SURF MOUNT)	$ 2,715	174.56	T	T	T	T
Playmaker	ZZPM3537	SLIDE- NUVO 360 SPIRAL SLIDE	$ 7,469	680.00	T	T	T	T
Playmaker	ZZPM3537S	SLIDE- NUVO 360 SPIRAL SLIDE	$ 7,469	680.00	T	T	T	T
Playmaker	ZZPM3538	NUVO 36IN DOUBLE SLIDE	$ 2,566	158.01	T	T	T	T
Playmaker	ZZPM3538S	NUVO 36IN DOUBLE SLIDE SURFACE MOUNT	$ 2,566	151.11	T	T	T	T
Playmaker	ZZPM3547	NUVO 360 SPIRAL SLIDE (EN VERSION)	$ 7,611	348.60	T	T	T	T
Playmaker	ZZPM3547S	NUVO 360 SPIRAL SLIDE (EN VERSION) (SM)	$ 7,611	327.38	T	T	T	T
Playmaker	ZZPM4059	COATED OVAL CRAWL TUBE (UNDERDECK)	$ 4,379	179.82	T	T	T	T
Playmaker	ZZPM4060	COATED OVAL CRAWL TUBE (DECK TO DECK)	$ 4,848	173.38	T	T	T	F
Playmaker	ZZPM4070	COATED OVAL CRAWL TUBE (GROUND LEVEL)	$ 5,121	175.82	T	T	T	T
Playmaker	ZZPM4080	COATED OVAL CRAWL THRU PANEL (GROUND LEVEL)	$ 1,852	43.30	T	T	T	F
Playmaker	ZZPM4090	CENTERLINE PIPE WALL BARRIER	$ 913	37.22	T	T	T	T
Playmaker	ZZPM4190	SMALL HAND HOLD	$ 257	6.40	T	T	T	T
Playmaker	ZZPM4288	ACCESS GATE	$ 710	34.38	T	T	T	T
Playmaker	ZZPM4290	STEERING WHEEL (POST MOUNT)	$ 426	8.67	T	T	T	T
Playmaker	ZZPM4296	PIPE WALL FOR LONG SIDE	$ 1,175	57.13	T	T	T	T
Playmaker	ZZPM4297	ABC & 123 PANEL	$ 1,496	53.38	T	T	T	T
Playmaker	ZZPM4298	ABC & 123 PANEL (GROUND LEVEL)	$ 1,627	54.26	T	T	T	T
Playmaker	ZZPM4318	FIND THE WAY HOME PANEL	$ 1,557	53.38	T	T	T	T
Playmaker	ZZPM4319	FIND THE WAY HOME PANEL (GROUND LEVEL)	$ 1,693	54.26	T	T	T	T
Playmaker	ZZPM4328	ANIMAL LOCATOR PANEL	$ 1,867	61.93	T	T	T	T
Playmaker	ZZPM4329	ANIMAL LOCATOR PANEL (GROUND LEVEL)	$ 1,994	62.81	T	T	T	T
Playmaker	ZZPM4350	TIC-TAC-TOE ACTIVITY WALL	$ 2,256	59.40	T	T	T	T
Playmaker	ZZPM4351	DISCO SPINNER	$ 1,150	16.00	T	T	T	T
Playmaker	ZZPM4356	BALCONY	$ 2,103	104.22	T	T	T	T
Playmaker	ZZPM4357	PIPEWALL WITH LOWER TELESCOPE	$ 1,234	43.55	T	T	T	T
Playmaker	ZZPM4364	CONTAINMENT KALEIDOBARRIER 60IN TALL - LEFT	$ 2,271	67.60	T	T	T	T
Playmaker	ZZPM4365	CONTAINMENT KALEIDOBARRIER 60IN TALL - RIGHT	$ 2,271	67.60	T	T	T	T
Playmaker	ZZPM4369	CUSTOM GRAPHICS DESIGN-A-PANEL	$ 2,715	49.76	T	T	T	T
Playmaker	ZZPM4371	CONTAINMENT KALEIDOBARRIER FOR 60IN DECK SPAN - LEFT	$ 1,983	64.80	T	T	T	T
Playmaker	ZZPM4372	CONTAINMENT KALEIDOBARRIER FOR 60IN DECK SPAN - RIGHT	$ 1,983	64.80	T	T	T	T
Playmaker	ZZPM4373	KALEIDOBARRIER 44IN TALL - LEFT	$ 2,173	53.40	T	T	T	T
Playmaker	ZZPM4374	KALEIDOBARRIER 44IN TALL - RIGHT	$ 2,173	53.40	T	T	T	T
Playmaker	ZZPM4381	KALEIDOBARRIER SET FOR CENTRAL TOWERS	$ 39,879	1119.90	T	T	T	T
Playmaker	ZZPM4383	HEX KALEIDO FILLER PANEL	$ 1,518	41.90	T	T	T	T
Playmaker	ZZPM4384	HEX KALEIDO DOUBLE BARRIER	$ 3,588	108.50	T	T	T	T

Playmaker	ZZPM4385	HEX KALEIDO TRIPLE BARRIER	$ 4,200	120.30	T	T	T	T
Playmaker	ZZPM4386	DRIVER PANEL	$ 3,960	88.31	T	T	T	T
Playmaker	ZZPM4387	DRIVER PANEL (GROUND LEVEL)	$ 4,113	98.31	T	T	T	T
Playmaker	ZZPM4387S	DRIVER PANEL (SURFACE MOUNT)	$ 4,113	99.71	T	T	T	T
Playmaker	ZZPM4388	CUSTOM GRAPHIC PANEL (DECK MOUNT)	$ 2,729	97.06	T	T	T	T
Playmaker	ZZPM4389	DOUBLE SIDED CUSTOM GRAPHICS PANEL (DECK MOUNT)	$ 3,031	110.62	T	T	T	T
Playmaker	ZZPM4394	HEX TOWER KALEIDOBARRIER SET FOR 1 SLIDE	$ 29,986	760.50	T	T	T	T
Playmaker	ZZPM4395	HEX TOWER KALEIDOBARRIER SET FOR 2 SLIDES	$ 26,749	834.50	T	T	T	T
Playmaker	ZZPM4396	ACCESSIBLE MAZE PANEL	$ 960	24.72	T	T	T	T
Playmaker	ZZPM4399	ACCESSIBLE PLANE PANEL	$ 1,295	27.49	T	T	T	T
Playmaker	ZZPM4405	STANDARD CONTAINMENT ACTIVITY BARRIER 60IN TALL	$ 1,256	63.30	T	T	T	T
Playmaker	ZZPM4406	ACCESSIBLE DRIVING PANEL	$ 1,113	31.59	T	T	T	T
Playmaker	ZZPM4407	ACCESSIBLE SOLAR SYSTEM PANEL	$ 1,703	27.66	T	T	T	T
Playmaker	ZZPM4408	ACCESSIBLE BUGS PANEL	$ 1,633	42.96	T	T	T	T
Playmaker	ZZPM4409	ACCESSIBLE BELL PANEL	$ 1,299	32.28	T	T	T	T
Playmaker	ZZPM4417	BELL PANEL FOR LONG SIDE	$ 2,365	84.54	T	T	T	T
Playmaker	ZZPM4418	CHIME PANEL FOR LONG SIDE	$ 3,097	98.53	T	T	T	T
Playmaker	ZZPM4419	ANIMAL LOCATOR PANEL FOR LONG SIDE	$ 1,900	80.93	T	T	T	T
Playmaker	ZZPM4436	DOUBLE SIDED CUSTOM GRAPHICS PANEL (GROUND LEVEL)	$ 3,144	120.62	T	T	T	T
Playmaker	ZZPM4436S	DOUBLE SIDED CUSTOM GRAPHICS PANEL (GROUND LEVEL) SURF MNT	$ 3,144	122.02	T	T	T	T
Playmaker	ZZPM4437	CUSTOM GRAPHICS PANEL (GROUND LEVEL)	$ 2,846	107.06	T	T	T	T
Playmaker	ZZPM4437S	CUSTOM GRAPHICS PANEL (GROUND LEVEL) SURFACE MOUNT	$ 2,846	108.46	T	T	T	T
Playmaker	ZZPM4441	VORTEX SUPPORT LEGS	$ 579	63.3	T	T	T	T
Playmaker	ZZPM4446	SLIDE-N-LEARN PANEL	$ 2,114	79.60	T	T	T	T
Playmaker	ZZPM4447	SLIDE-N-LEARN PANEL (GROUND LEVEL)	$ 2,310	79.86	T	T	T	T
Playmaker	ZZPM4451	KINETIC TOPPER - STRAIGHT CLAMPS	$ 1,799	52.90	T	T	T	T
Playmaker	ZZPM4452	KINETIC TOPPER - 45 DEG CLAMPS	$ 1,832	51.90	T	T	T	T
Playmaker	ZZPM4453	KINETIC TOPPER - 30 DEG CLAMPS	$ 1,832	51.90	T	T	T	T
Playmaker	ZZPM4454	KINETIC TOPPER - LEFT CLAMP AT 45 DEG	$ 1,832	51.90	T	T	T	T
Playmaker	ZZPM4455	KINETIC TOPPER - RIGHT CLAMP AT 45 DEG	$ 1,832	51.90	T	T	T	T
Playmaker	ZZPM4456	UPPER SILO CLIMBER EXTENDED BARRIER	$ 978	47.78	T	F	T	T
Playmaker	ZZPM4457	TREASURE TUMBLE PANEL	$ 3,647	67.68	T	T	T	T
Playmaker	ZZPM4458	TREASURE TUMBLE PANEL (GROUND LEVEL)	$ 3,807	68.17	T	T	T	T
Playmaker	ZZPM4467	GROUND TO GROUND BABBLE-ON	$ 1,196	45.47	T	T	T	T
Playmaker	ZZPM4487	DRIVE AWAY HALF PANEL	$ 6,864	53.31	T	T	T	T
Playmaker	ZZPM4488	DRIVE AWAY PANEL (DECK MOUNT)	$ 7,399	72.55	T	T	T	T
Playmaker	ZZPM4489	POST MOUNT ACCESS GATES	$ 782	33.90	T	T	T	T
Playmaker	ZZPM4496	GEO BARRIER	$ 1,845	56.38	T	T	T	T
Playmaker	ZZPM4497	GEO ACCESS GATE	$ 1,234	44.60	T	T	T	T
Playmaker	ZZPM4537	SPIN RACER PANEL (DECK LEVEL)	$ 1,819	63.90	T	T	T	T
Playmaker	ZZPM4538	SPIN RACER PANEL (GROUND LEVEL)	$ 1,950	63.32	T	T	T	T
Playmaker	ZZPM4546	SCAVENGER HUNT (DECK LEVEL)	$ 2,278	52.85	T	T	T	T
Playmaker	ZZPM4547	SCAVENGER HUNT (GROUND LEVEL)	$ 2,402	56.54	T	T	T	T
Playmaker	ZZPM4548	NATURE HUNT PANEL (DECK LEVEL)	$ 1,972	52.30	T	T	T	T
Playmaker	ZZPM4549	NATURE HUNT PANEL (GROUND LEVEL)	$ 2,070	53.57	T	T	T	T
Playmaker	ZZPM4556	7in BELL (POST MOUNT)	$ 273	4.93	T	T	T	T
Playmaker	ZZPM4557	8in BELL (POST MOUNT)	$ 291	5.47	T	T	T	T
Playmaker	ZZPM4558	9in BELL (POST MOUNT)	$ 305	6.53	T	T	T	T
Playmaker	ZZPM4559	10in BELL (POST MOUNT)	$ 323	7.19	T	T	T	T
Playmaker	ZZPM4570	PLAYSEAT	$ 1,299	51.03	T	T	T	T
Playmaker	ZZPM4578	ANYWHERE SEAT	$ 672	32.35	T	T	T	T
Playmaker	ZZPM4586	DRUM PANEL	$ 1,802	65.98	T	T	T	T
Playmaker	ZZPM4587	DRUM PANEL (GROUND LEVEL)	$ 1,921	62.86	T	T	T	T
Playmaker	ZZPM4588	BELL PANEL	$ 2,005	60.44	T	T	T	T
Playmaker	ZZPM4589	BELL PANEL (GROUND LEVEL)	$ 2,136	61.63	T	T	T	T
Playmaker	ZZPM4606	CHIME PANEL	$ 2,725	76.75	T	T	T	T
Playmaker	ZZPM4607	CHIME PANEL (GROUND LEVEL)	$ 2,868	77.35	T	T	T	T
Playmaker	ZZPM4608	CHIME BANNER	$ 1,266	28.59	T	T	T	T
Playmaker	ZZPM4609	HORN PANEL	$ 2,387	59.18	T	T	T	T
Playmaker	ZZPM4611	HORN PANEL GROUND LEVEL	$ 2,507	60.26	T	T	T	T
Playmaker	ZZPM4626	WINDOW PLANTER PANEL	$ 1,907	57.25	T	T	T	T
Playmaker	ZZPM4627	MAGNIFYING PLAY PANEL	$ 1,895	49.08	T	T	T	T
Playmaker	ZZPM4636	NATURE SOUNDS PANEL (DECK MOUNT)	$ 5,390	31.47	T	T	T	T
Playmaker	ZZPM4637	NATURE SOUNDS HALF PANEL	$ 4,651	35.30	T	T	T	T
Playmaker	ZZPM4638	NATURE SOUNDS POST MOUNT PANEL	$ 4,069	31.19	T	T	T	T
Playmaker	ZZPM4639	TREE HOUSE DOORWAY (GROUND LEVEL)	$ 1,266	36.51	T	T	T	T
Playmaker	ZZPM4646	STOREFRONT PANEL	$ 1,125	44.80	T	T	T	T
Playmaker	ZZPM4647	TREE HOUSE BARRIER	$ 1,540	52.12	T	T	T	T
Playmaker	ZZPM4648	POST MOUNT SCAVENGER HUNT (PM)	$ 1,121	17.30	T	T	T	T
Playmaker	ZZPM4649	POST MOUNT DRUM (PM)	$ 589	14.22	T	T	T	T
Playmaker	ZZPM4658	PLAYWOOD ACCESS GATES	$ 1,230	58.66	T	T	T	T
Playmaker	ZZPM4659	PLAYWOOD WALL BARRIER	$ 1,190	59.30	T	T	T	T
Playmaker	ZZPM4671	PM PANEL FRAME - DECK LEVEL	$ 518	46.46	T	T	T	T
Playmaker	ZZPM4672	PM PANEL FRAME - GROUND LEVEL	$ 657	47.44	T	T	T	T
Playmaker	ZZPM4687	SKYLIGHT	$ 3,250	149.9	T	T	T	T
Playmaker	ZZPM4695	MIGHTY DESCENT W/ PRISM PASS	$ 17,428	1184.2	T	T	T	T
Playmaker	ZZPM4695S	MIGHTY DESCENT W/ PRISM PASS (SM)	$ 17,428	1176.5	T	T	T	T
Playmaker	ZZPM4696	MIGHTY DESCENT	$ 10,949	791.1	T	T	T	T
Playmaker	ZZPM4696S	MIGHTY DESCENT (SM)	$ 10,949	778.3	T	T	T	T
Playmaker	ZZPM4701	VERTICLIMBER 36IN	$ 1,972	112.3	T	T	T	T
Playmaker	ZZPM4701S	VERTICLIMBER 36IN (SM)	$ 1,972	110.5	T	T	T	T
Playmaker	ZZPM4702	VERTICLIMBER 48IN	$ 2,169	129.3	T	T	T	T
Playmaker	ZZPM4702S	VERTICLIMBER 48IN (SM)	$ 2,169	127.5	T	T	T	T
Playmaker	ZZPM4703	VERTICLIMBER 60IN	$ 2,234	128.3	T	T	T	T
Playmaker	ZZPM4703S	VERTICLIMBER 60IN (SM)	$ 2,234	126.5	T	T	T	T
Playmaker	ZZPM4704	VERTICLIMBER 72IN	$ 2,288	136.5	T	T	T	T
Playmaker	ZZPM4704S	VERTICLIMBER 72IN (SM)	$ 2,288	134.7	T	T	T	T
Playmaker	ZZPM4705	VERTICLIMBER 84IN	$ 2,332	142.5	T	T	T	T
Playmaker	ZZPM4705S	VERTICLIMBER 84IN (SM)	$ 2,332	140.7	T	T	T	T
Playmaker	ZZPM4706	VERTICLIMBER 96IN	$ 2,664	151.8	T	T	T	T
Playmaker	ZZPM4706S	VERTICLIMBER 96IN (SM)	$ 2,664	149.2	T	T	T	T

Playmaker	ZZPM4707	CONVERGE	$ 13,421	751.1	T	T	T	T
Playmaker	ZZPM4707S	CONVERGE (SM)	$ 13,421	662	T	T	T	T
Playmaker	ZZPM4708	ROUND THE CORNER	$ 9,162	591.5	T	T	T	T
Playmaker	ZZPM4708S	ROUND THE CORNER (SM)	$ 9,162	538.4	T	T	T	T
Playmaker	ZZPM4709	KINETIC FLAG	$ 1,126	57.9	T	T	T	T
Playmaker	ZZPM4714	17FT HEX HAT SHADE	$ 7,279	562.50	T	T	T	T
Playmaker	ZZPM4715	26FT HEX HAT SHADE	$ 11,189	747.40	T	T	T	T
Playmaker	ZZPM4716	12FT SQUARE HAT SHADE	$ 6,333	371.80	T	T	T	T
Playmaker	ZZPM4717	18FT SQUARE HAT SHADE	$ 9,529	495.50	T	T	T	T
Playmaker	ZZPM4718	20FT SQUARE HAT SHADE	$ 10,162	537.70	T	T	T	T
Playmaker	ZZPM4740	CONTAINMENT PIPE WALL (HEX TOWER)	$ 1,081	56.36	T	T	T	T
Playmaker	ZZPM4807	OVAL INSERT PANEL (DECK MOUNT)	$ 1,077	39.82	T	T	T	T
Playmaker	ZZPM4808	OVAL INSERT PANEL (GROUND LEVEL)	$ 1,109	34.04	T	T	T	T
Playmaker	ZZPM4811	OVAL BUBBLE PANEL (DECK MOUNT)	$ 1,452	45.15	T	T	T	T
Playmaker	ZZPM4812	OVAL BUBBLE PANEL (GROUND LEVEL)	$ 1,470	39.37	T	T	T	T
RopeScapes	ZZPM4833	OFFSET ACCESS BARRIER	$ 470	36.3	T	T	T	T
Playmaker	ZZPM4836	NUVO ACTIVITY PANEL	$ 1,452	33.44	T	T	T	T
Playmaker	ZZPM4837	NUVO - ACESS GATES	$ 917	25.89	T	T	T	T
Playmaker	ZZPM4847	CITYSCAPES STOREFRONT PANEL	$ 1,550	45.30	T	T	T	F
Playmaker	ZZPM4887	CUSTOM GRAPHIC GROUND LEVEL	$ 4,804	97.52	T	T	T	T
Playmaker	ZZPM4888	CUSTOM GRAPHIC DECK LEVEL	$ 5,438	98.37	T	T	T	T
Playmaker	ZZPM4889	CUSTOM GRAPHIC LIFE-SIZE	$ 7,268	159.42	T	T	T	T
Playmaker	ZZPM4896	SLING SEAT	$ 698	23.26	T	T	T	T
RopeScapes	ZZPM5001	TIANZI ™ TWIN OVERLAY	$ 9,100	266.3	T	T	T	T
RopeScapes	ZZPM5002	TIANZI ™ TOP ROPE PASS	$ 2,704	98.4	T	T	T	T
RopeScapes	ZZPM5002S	TIANZI ™ TOP ROPE PASS (SM)	$ 2,704	110.2	T	T	T	T
RopeScapes	ZZPM5002SD	TIANZI ™ TOP ROPE PASS (4IN SM)	$ 2,954	110.2	T	T	T	T
RopeScapes	ZZPM5003	TIANZI ™ PITCH CROSSING	$ 2,964	165.3	T	T	T	T
RopeScapes	ZZPM5003S	TIANZI ™ PITCH CROSSING (SM)	$ 2,964	140.7	T	T	T	T
RopeScapes	ZZPM5003SD	TIANZI ™ PITCH CROSSING (4IN SM)	$ 3,214	140.7	T	T	T	T
RopeScapes	ZZPM5004	TIANZI ™ TWO-POINT WEDGE	$ 2,548	100.6	T	T	T	T
RopeScapes	ZZPM5004S	TIANZI ™ TWO-POINT WEDGE (SM)	$ 2,548	84.2	T	T	T	T
RopeScapes	ZZPM5004SD	TIANZI ™ TWO-POINT WEDGE (4IN SM)	$ 2,798	84.2	T	T	T	T
RopeScapes	ZZPM5006	TIANZI ™ THREE-POINT TRAVERSE - SINGLE	$ 2,288	100.5	T	T	T	T
RopeScapes	ZZPM5006S	TIANZI ™ THREE-POINT TRAVERSE - SINGLE (SM)	$ 2,288	92.3	T	T	T	T
RopeScapes	ZZPM5006SD	TIANZI ™ THREE-POINT TRAVERSE - SINGLE (4IN SM)	$ 2,538	92.3	T	T	T	T
RopeScapes	ZZPM5007	TIANZI ™ THREE-POINT TRAVERSE - DOUBLE	$ 3,094	172.8	T	T	T	T
RopeScapes	ZZPM5007S	TIANZI ™ THREE-POINT TRAVERSE - DOUBLE (SM)	$ 3,094	156.4	T	T	T	T
RopeScapes	ZZPM5007SD	TIANZI ™ THREE-POINT TRAVERSE - DOUBLE (4IN SM)	$ 3,344	156.4	T	T	T	T
RopeScapes	ZZPM5008	STEP AROUND	$ 254	6.8	T	T	T	T
Playmaker	ZZPM5009	ANGLED FLAG	$ 602	38	T	T	T	T
Playmaker	ZZPM5190	CRAWL THRU PANEL (GROUND LEVEL)	$ 1,131	34.46	T	T	T	T
Playmaker	ZZPM5206	NATURE LOG TUBE (DECK LEVEL)	$ 3,807	145.27	T	T	T	T
Playmaker	ZZPM5207	NATURE LOG TUBE (GROUND LEVEL)	$ 3,942	148.65	T	T	T	T
Playmaker	ZZPM5691	PASSAGE CRAWL TUBE 2.0	$ 2,860	127.40	T	T	T	T
Playmaker	ZZPM5692	BEND ADVENTURE TUBE 2.0	$ 3,047	118.80	T	T	T	T
Playmaker	ZZPM5693	FUNNEL ADVENTURE TUBE 2.0	$ 4,270	194.40	T	T	T	T
Playmaker	ZZPM5694	VERTICAL S ADVENTURE TUBE 2.0	$ 4,538	167.00	T	T	T	T
Playmaker	ZZPM5695	HORIZONTAL S/90 DEG ADVENTURE TUBE 2.0	$ 4,331	165.10	T	T	T	T
Playmaker	ZZPM5696	PASSAGE ADVENTURE TUBE (GROUND LEVEL) 2.0	$ 3,090	128.40	T	T	T	T
Playmaker	ZZPM5697	HORIZONTAL S/90 DEG ADVENTURE TUBE (GROUNF LVL) 2.0	$ 4,564	166.10	T	T	T	T
Playmaker	ZZPM5698	ADVENTURE CRAWL TUBE FUNNEL (GROUND TO DECK) 2.0	$ 4,385	193.80	T	T	T	T
Playmaker	ZZPM5699	BEND ADVENTURE CRAWL TUBE (GROUND LEVEL) 2.0	$ 3,271	119.80	T	T	T	T
Playmaker	ZZPM5701	DOUBLE PASSAGE ADVENTURE TUBE (GROUND LEVEL) 2.0	$ 4,193	183.40	T	T	T	T
Playmaker	ZZPM5702	VERTICAL S CRAWL TUBE (GROUND TO DECK) 2.0	$ 4,651	167.50	T	T	T	T
Playmaker	ZZPM5703	DOUBLE PASSAGE ADVENTURE TUBE (DECK LEVEL) 2.0	$ 4,549	182.30	T	T	T	T
Playmaker	ZZPM5716	270 DEGREE HORIZONTAL LOOP LADDER	$ 4,105	174.24	T	T	T	T
Playmaker	ZZPM5716S	270 DEGREE HORIZONTAL LOOP LADDER SURFACE MOUNT	$ 4,105	171.24	T	T	T	T
Playmaker	ZZPM5736	CHINNING/TURNING BAR	$ 269	9.25	T	T	T	T
Playmaker	ZZPM5770	LEG LIFT	$ 192	7.20	T	T	T	T
Playmaker	ZZPM5780	6ft HORIZONTAL LOOP LADDER	$ 1,037	60.60	T	T	T	T
Playmaker	ZZPM5790	10ft HORIZONTAL LOOP LADDER	$ 1,667	84.46	T	T	T	T
Playmaker	ZZPM5850	90 DEGREE HORIZONTAL LOOP LADDER	$ 1,448	72.66	T	T	T	T
Playmaker	ZZPM5880	6ft HORIZONTAL SPIRAL LADDER	$ 1,157	67.50	T	T	T	T
Playmaker	ZZPM5950	OVERHEAD EVENT ACCESS LADDER (12in DECK)	$ 819	26.26	T	T	T	T
Playmaker	ZZPM5950S	OVERHEAD EVENT ACCESS LADDER (1) RUNG (SURFACE MOUNT)	$ 819	31.26	T	T	T	T
Playmaker	ZZPM5960	OVERHEAD EVENT ACCESS LADDER (24in DECK)	$ 837	26.96	T	T	T	T
Playmaker	ZZPM5960S	OVERHEAD EVENT ACCESS LADDER (2) RUNG (SURFACE MOUNT)	$ 837	31.96	T	T	T	T
Playmaker	ZZPM5970	OVERHEAD EVENT ACCESS LADDER (36in DECK)	$ 858	26.16	T	T	T	T
Playmaker	ZZPM5970S	OVERHEAD EVENT ACCESS LADDER (36in DECK) (SURFACE MOUNT)	$ 858	31.16	T	T	T	T
Playmaker	ZZPM6080	48IN TRI-VERSE CLIMBER	$ 3,275	103.8	T	T	T	T
Playmaker	ZZPM6080S	48IN TRI-VERSE CLIMBER (SM)	$ 3,275	92.2	T	T	T	T
Playmaker	ZZPM6080SD	48IN TRI-VERSE CLIMBER (4IN SM)	$ 3,525	92.2	T	T	T	T
Playmaker	ZZPM6081	72IN TRI-VERSE CLIMBER	$ 3,600	121	T	T	T	T
Playmaker	ZZPM6081S	72IN TRI-VERSE CLIMBER (SM)	$ 3,600	109.4	T	T	T	T
Playmaker	ZZPM6081SD	72IN TRI-VERSE CLIMBER (4IN SM)	$ 3,850	109.4	T	T	T	T
Playmaker	ZZPM6082	96IN TRI-VERSE CLIMBER	$ 4,300	138.3	T	T	T	T
Playmaker	ZZPM6082S	96IN TRI-VERSE CLIMBER (SM)	$ 4,300	126.7	T	T	T	T
Playmaker	ZZPM6082SD	96IN TRI-VERSE CLIMBER (4IN SM)	$ 4,550	126.7	T	T	T	T
Playmaker	ZZPM6083	FLEX GRIP CROSSING	$ 4,300	194.8	T	T	T	T
Playmaker	ZZPM6084	FLEX GRIP PIVOT	$ 3,175	147.4	T	T	T	T
Playmaker	ZZPM6084S	FLEX GRIP PIVOT (SM)	$ 3,175	131	T	T	T	T
Playmaker	ZZPM6084SD	FLEX GRIP PIVOT (4IN SM)	$ 3,425	131.2	T	T	T	T
Playmaker	ZZPM6085	FLEX STEP CROSSING	$ 5,250	144.9	T	T	T	T
Playmaker	ZZPM6086	DECK MOUNT SKY PANEL FOR ACTIVITY INSERT	$ 1,175	62.6	T	T	T	T
Playmaker	ZZPM6089	DYNAMIC TERRACE	$ 12,600	763	T	T	T	T
Playmaker	ZZPM6089S	DYNAMIC TERRACE (SM)	$ 12,600	669.6	T	T	T	T
Playmaker	ZZPM6089SD	DYNAMIC TERRACE (4IN SM)	$ 12,850	693.2	T	T	T	T
Playmaker	ZZPM6089SE	DYNAMIC TERRACE (4.25IN SM)	$ 12,850	672.2	T	T	T	T
Playmaker	ZZPM6090	DYNAMIC TERRACE DOUBLE	$ 24,950	1580.1	T	T	T	T
Playmaker	ZZPM6090S	DYNAMIC TERRACE DOUBLE (SM)	$ 24,950	1388.9	T	T	T	T

Playmaker	ZZPM6090SD	DYNAMIC TERRACE DOUBLE (4IN SM)	$ 25,200	1436.7	T	T	T	T
Playmaker	ZZPM6090SE	DYNAMIC TERRACE DOUBLE (4.25IN SM)	$ 25,200	1393	T	T	T	T
Playmaker	ZZPM6140	18in KICK PLATE INFILL	$ 218	22.66	T	T	T	T
Playmaker	ZZPM6150	24in KICKPLATE INFILL	$ 338	34.46	T	T	T	T
Playmaker	ZZPM6157	24in KICKPLATE FOR LONG SIDE	$ 367	58.99	T	T	T	T
Playmaker	ZZPM6160	30in KICKPLATE INFILL	$ 378	44.86	T	T	T	T
Playmaker	ZZPM6170	36in KICKPLATE INFILL	$ 432	50.46	T	T	T	T
Playmaker	ZZPM6180	18in DECK TO DECK CLIMBER	$ 1,278	60.06	T	T	T	T
Playmaker	ZZPM6190	24in DECK TO DECK CLIMBER	$ 1,288	64.56	T	T	T	T
Playmaker	ZZPM6200	30in DECK TO DECK CLIMBER	$ 1,317	73.88	T	T	T	T
Playmaker	ZZPM6210	36in DECK TO DECK CLIMBER	$ 1,354	81.88	T	T	T	T
RopeScapes	ZZPM6312	SLACK LINE - NAICA TO PM POST	$ 702	17	T	T	T	T
RopeScapes	ZZPM6313	TRAIL SLING - NAICA TO PM POST	$ 3,729	94.7	T	T	T	T
RopeScapes	ZZPM6314	SLACK LINE - QUITO TO PM POST	$ 702	17	T	T	T	T
Playmaker	ZZPM6380	KALEIDOCROSSING	$ 10,800	416.50	T	T	T	T
Playmaker	ZZPM6381	KALEIDOCROSSING CATWALK	$ 8,640	318.80	T	T	T	T
Playmaker	ZZPM6387	6ft CANYON CROSSING (DK TO DK)	$ 3,287	88.06	T	T	T	T
Playmaker	ZZPM6388	6ft CANYON CROSSING (12in RISE)	$ 3,287	91.36	T	T	T	T
Playmaker	ZZPM6398	6ft ROPE BRIDGE	$ 5,471	86.38	T	T	T	T
Playmaker	ZZPM6399	10ft ROPE BRIDGE	$ 6,799	116.63	T	T	T	T
Playmaker	ZZPM6426	CRAZY BONES 6ft ARCH BRIDGE	$ 7,546	323.24	T	T	T	T
Playmaker	ZZPM6427	CRAZY BONES 6ft ARCH BRIDGE w/BINOCULARS	$ 8,583	335.60	T	T	T	T
Playmaker	ZZPM6428	CRAZY BONES 6ft ARCH BRIDGE w/CUSTOM LETTERING	$ 8,779	329.24	T	T	T	T
Playmaker	ZZPM6429	CRAZY BONES 6ft ARCH BRIDGE w/BINC & CUST LETTERING	$ 9,190	338.60	T	T	T	T
Playmaker	ZZPM6446	CRAZY BONES 10ft ARCH BRIDGE	$ 11,749	488.52	T	T	T	T
Playmaker	ZZPM6447	CRAZY BONES 10ft ARCH BRIDGE w/BINOCULARS	$ 13,089	499.88	T	T	T	T
Playmaker	ZZPM6448	CRAZY BONES 10ft ARCH BRIDGE w/CUSTOM LETTERING	$ 11,749	498.52	T	T	T	T
Playmaker	ZZPM6449	CRAZY BONES 10ft ARCH BRIDGE w/BINC & CUST LETTERING	$ 13,089	504.88	T	T	T	T
Playmaker	ZZPM6456	90 DEGREE CLOUD WALK	$ 7,360	311.06	T	T	T	T
Playmaker	ZZPM6458	DECK TO DECK CLOUD WALK (36in RISE RIGHT)	$ 8,354	319.09	T	T	T	T
Playmaker	ZZPM6459	DECK TO DECK CLOUD WALK (36in RISE LEFT)	$ 8,354	319.09	T	T	T	T
Playmaker	ZZPM6478	CRAZY BONES 6ft x 1ft RISE BRIDGE	$ 8,022	319.18	T	T	T	T
Playmaker	ZZPM6479	CRAZY BONES 6ft x 2ft RISE BRIDGE	$ 8,725	332.20	T	T	T	T
Playmaker	ZZPM6590	6ft ARCH BRIDGE	$ 3,287	205.29	T	T	T	T
Playmaker	ZZPM6596	10ft ADVENTURE BRIDGE w/ISO43 CHAIN	$ 9,762	331.62	T	T	T	T
Playmaker	ZZPM6597	6ft ADVENTURE BRIDGE w/ISO43 CHAIN	$ 5,896	204.34	T	T	T	T
Playmaker	ZZPM6606	LILY PODS	$ 5,886	243.96	T	T	T	T
Playmaker	ZZPM6606S	LILY PODS (12in OR 24in DECK) (SURFACE MOUNT)	$ 5,886	261.03	T	T	T	T
Playmaker	ZZPM6635	10ft COATED ARCH BRIDGE	$ 6,013	353.27	T	T	T	T
Playmaker	ZZPM6729	CONTAINMENT LEVEL FILLER BRACKET	$ 160	12.10	T	T	T	T
Playmaker	ZZPM6730	KALEIDOCLIMBER	$ 11,455	409.90	T	T	T	T
Playmaker	ZZPM6731	CENTRAL TOWER 14FT	$ 109,021	7270.50	T	T	T	T
Playmaker	ZZPM6732	CENTRAL TOWER 9FT	$ 86,875	5717.90	T	T	T	T
Playmaker	ZZPM6756	4ft GEO CLIMBER	$ 2,922	127.92	T	T	T	T
Playmaker	ZZPM6757	5ft GEO CLIMBER	$ 2,948	133.86	T	T	T	T
Playmaker	ZZPM6757S	5ft GEO CLIMBER (SUFRACE MOUNT)	$ 2,948	123.30	T	T	T	T
Playmaker	ZZPM6770	RHYTHM SPINNER HALF PANEL	$ 7,705	44.60	T	T	T	T
Playmaker	ZZPM6776	RHYTHM SPINNER (DECK MOUNT)	$ 8,131	62.70	T	T	T	T
Playmaker	ZZPM6780	ANIMAL TUNES HALF PANEL	$ 4,859	44.97	T	T	T	T
Playmaker	ZZPM6786	ANIMAL TUNES PANEL DECK MOUNT	$ 5,362	63.15	T	T	T	T
Playmaker	ZZPM6787	ANIMAL TUNES POST MOUNT PANEL	$ 4,156	29.62	T	T	T	T
Playmaker	ZZPM6790	POST MOUNT SPINNER	$ 4,152	59.7	T	T	T	T
Playmaker	ZZPM6798	SPIN CENTRAL - CSA (PM)	$ 2,082	56.74	T	T	T	T
Playmaker	ZZPM6799	CSA VORTEX (PM)	$ 4,717	179.58	T	T	T	T
Playmaker	ZZPM6808	SKY SWIVELS	$ 2,402	112.12	T	T	T	T
Playmaker	ZZPM6809	TWISTER	$ 3,996	102.11	T	T	F	T
Playmaker	ZZPM6810	VORTEX	$ 4,695	162.23	T	T	F	T
Playmaker	ZZPM6816	TREE HOUSE CLIMBER (48in DECK)	$ 3,047	120.94	T	T	T	T
Playmaker	ZZPM6816S	TREE HOUSE CLIMBER (48in DECK) SURF MOUNT	$ 3,047	117.64	T	T	T	T
Playmaker	ZZPM6817	TREE HOUSE CLIMBER (60in DECK)	$ 3,414	138.23	T	T	T	T
Playmaker	ZZPM6817S	TREE HOUSE CLIMBER (60in DECK) SURF MOUNT	$ 3,414	134.71	T	T	T	T
Playmaker	ZZPM6818	TREE HOUSE CLIMBER (72in DECK)	$ 3,708	157.80	T	T	T	T
Playmaker	ZZPM6818S	TREE HOUSE CLIMBER (72in DECK) SURF MOUNT	$ 3,708	154.50	T	T	T	T
Playmaker	ZZPM6819	TREE HOUSE CLIMBER (84in DECK)	$ 4,455	177.10	T	T	T	T
Playmaker	ZZPM6819S	TREE HOUSE CLIMBER (84in DECK) SURF MOUNT	$ 4,455	173.80	T	T	T	T
Playmaker	ZZPM6820	TREE HOUSE CLIMBER (96in DECK)	$ 4,848	196.04	T	T	T	T
Playmaker	ZZPM6820S	TREE HOUSE CLIMBER (96in DECK) SURF MOUNT	$ 4,848	192.73	T	T	T	T
Playmaker	ZZPM6827	THE WILDWOOD CLIMBER (60in DK)	$ 3,516	187.90	T	T	T	T
Playmaker	ZZPM6827S	THE WILDWOOD CLIMBER (60in DK) SURFACE MOUNT	$ 3,516	177.34	T	T	T	T
Playmaker	ZZPM6836	6ft DECK-DECK VINE CLIMBER	$ 8,791	314.13	T	T	T	T
Playmaker	ZZPM6836S	6ft DECK-DECK VINE CLIMBER SURF MOUNT	$ 8,791	313.69	T	T	T	T
Playmaker	ZZPM6839	THE WILDWOOD CLIMBER (48n DK)	$ 3,479	181.96	T	T	T	T
Playmaker	ZZPM6850	U-BOUNCE	$ 2,020	104.76	T	T	T	T
Playmaker	ZZPM6857	CRITTER CROSSING	$ 1,623	60.88	T	T	T	T
Playmaker	ZZPM6862	HILL SLIDE PLATFORM	$ 895	71.1	T	T	T	T
Playmaker	ZZPM6862S	HILL SLIDE PLATFORM (SM)	$ 895	70.7	T	T	T	T
Playmaker	ZZPM6888	TWIST-N-TWIRL	$ 1,365	51.07	T	T	T	T
Playmaker	ZZPM6890	10ft CATWALK	$ 6,585	402.96	T	T	T	T
Playmaker	ZZPM6936	HORIZONTAL LADDER W/ PARALLEL BARS	$ 2,151	136.23	T	T	T	T
Playmaker	ZZPM6957	NUVO LOOP CLIMBER	$ 4,790	178.14	T	T	T	T
Playmaker	ZZPM6958	6ft PLAYWOOD ARCH BRIDGE	$ 6,200	358.19	T	T	T	T
Playmaker	ZZPM6959	10ft PLAYWOOD ARCH BRIDGE	$ 8,700	563.34	T	T	T	T
Playmaker	ZZPM6966	10ft ROUNDABOUT HORIZONTAL LADDER	$ 2,708	147.86	T	T	T	T
Playmaker	ZZPM6967	6ft GEO ARCH BRIDGE	$ 7,000	297.70	T	T	T	T
Playmaker	ZZPM6968	10ft GEO ARCH BRIDGE	$ 10,887	505.90	F	T	F	F
Playmaker	ZZPM6979	INCLINED CLIFF HANGER (96in DECK)	$ 4,706	224.60	T	T	T	T
Playmaker	ZZPM6979S	INCLINED CLIFF HANGER (96in DECK) (SURF MNT)	$ 4,706	221.30	T	T	T	T
Playmaker	ZZPM6986	INCLINED CLIFF HANGER (84in DECK)	$ 4,375	201.70	T	T	T	T
Playmaker	ZZPM6986S	INCLINED CLIFF HANGER (84in DECK) SURFACE MOUNT	$ 4,375	193.40	T	T	T	T
Playmaker	ZZPM6987	INCLINED CLIFF HANGER (48in DECK)	$ 2,878	134.70	T	T	T	T
Playmaker	ZZPM6987S	INCLINED CLIFF HANGER (48in DECK) SURF MNT	$ 2,878	131.40	T	T	T	T

Playmaker	ZZPM6988	INCLINED CLIFF HANGER (60in DECK)	$ 3,319	156.60	T	T	T	T
Playmaker	ZZPM6988S	INCLINED CLIFF HANGER (60in DECK) SURF MNT	$ 3,319	153.20	T	T	T	T
Playmaker	ZZPM6989	INCLINED CLIFF HANGER (72in DECK)	$ 3,512	178.50	T	T	T	T
Playmaker	ZZPM6989S	INCLINED CLIFF HANGER (72in DECK) SURF MNT	$ 3,512	175.20	T	T	T	T
Playmaker	ZZPM6996	GEO VERTICAL CLIMBER (48in DK)	$ 2,256	80.13	T	T	T	T
Playmaker	ZZPM6997	GEO VERTICAL CLIMBER (60in DK)	$ 2,380	85.30	T	T	T	T
Playmaker	ZZPM6998	GEO VERTICAL CLIMBER (72in DK)	$ 2,729	98.81	T	T	T	T
Playmaker	ZZPM7006	GEO ARCH CLIMBER (48in DK)	$ 1,845	72.67	T	T	T	T
Playmaker	ZZPM7006S	GEO ARCH CLIMBER (48in DK) SURF MOUNT	$ 1,845	75.42	T	T	T	T
Playmaker	ZZPM7007	GEO ARCH CLIMBER (60in DK)	$ 2,544	88.61	T	T	T	T
Playmaker	ZZPM7007S	GEO ARCH CLIMBER (60in DK) SURF MOUNT	$ 2,544	91.58	T	T	T	T
Playmaker	ZZPM7008	GEO ARCH CLIMBER (72in DK)	$ 2,693	96.97	T	T	T	T
Playmaker	ZZPM7008S	GEO ARCH CLIMBER (72in DK) SURF MOUNT	$ 2,693	99.94	T	T	T	T
Playmaker	ZZPM7046	36IN TWIST CLIMBER	$ 2,787	92.65	T	T	T	T
Playmaker	ZZPM7046S	36IN TWIST CLIMBER (SM)	$ 2,787	92.65	T	T	T	T
Playmaker	ZZPM7047	48IN TWIST CLIMBER	$ 2,841	106.97	T	T	T	T
Playmaker	ZZPM7047S	48IN TWIST CLIMBER (SM)	$ 2,841	106.97	T	T	T	T
Playmaker	ZZPM7048	60IN TWIST CLIMBER	$ 2,918	117.04	T	T	T	T
Playmaker	ZZPM7048S	60IN TWIST CLIMBER (SM)	$ 2,918	117.04	T	T	T	T
Playmaker	ZZPM7049	72IN TWIST CLIMBER	$ 3,217	130.22	T	T	T	T
Playmaker	ZZPM7049S	72IN TWIST CLIMBER (SM)	$ 3,217	130.22	T	T	T	T
Playmaker	ZZPM7056	36IN CURVY CLIMBER	$ 3,068	80.02	T	T	T	T
Playmaker	ZZPM7056S	36IN CURVY CLIMBER (SM)	$ 3,068	81.45	T	T	T	T
Playmaker	ZZPM7057	48IN CURVY CLIMBER	$ 3,156	83.21	T	T	T	T
Playmaker	ZZPM7057S	48IN CURVY CLIMBER (SM)	$ 3,156	86.29	T	T	T	T
Playmaker	ZZPM7058	60IN CURVY CLIMBER	$ 3,239	90.47	T	T	T	T
Playmaker	ZZPM7058S	60IN CURVY CLIMBER (SM)	$ 3,239	91.24	T	T	T	T
Playmaker	ZZPM7059	72IN CURVY CLIMBER	$ 3,326	95.53	T	T	T	T
Playmaker	ZZPM7059S	72IN CURVY CLIMBER (SM)	$ 3,326	96.19	T	T	T	T
Playmaker	ZZPM7066	RUSHMORE	$ 22,516	894.60	T	T	T	T
Playmaker	ZZPM7066S	RUSHMORE (SM)	$ 22,516	658.33	T	T	T	T
Playmaker	ZZPM7067	SKY RAIL	$ 4,498	162.66	T	T	T	F
Playmaker	ZZPM7068	SKY RAIL (EN)	$ 4,673	162.2	T	T	T	T
Playmaker	ZZPM7080	6ft CATWALK	$ 4,397	253.68	T	T	T	T
Playmaker	ZZPM7086	CLIMBING SQUARES BLOCK CLIMBER (24IN)	$ 1,605	77.49	T	T	T	T
Playmaker	ZZPM7086S	CLIMBING SQUARES BLOCK CLIMBER (24IN) (SURFACE MOUNT)	$ 1,605	72.27	T	T	T	T
Playmaker	ZZPM7087	CLIMBING SQUARES BLOCK CLIMBER (36IN)	$ 2,173	118.28	T	T	T	T
Playmaker	ZZPM7087S	CLIMBING SQUARES BLOCK CLIMBER (36IN) (SURFACE MOUNT)	$ 2,173	103.65	T	T	T	T
Playmaker	ZZPM7088	CLIMBING SQUARES BLOCK CLIMBER (48IN)	$ 3,232	164.82	T	T	T	T
Playmaker	ZZPM7088S	CLIMBING SQUARES BLOCK CLIMBER (48IN) (SURFACE MOUNT)	$ 3,232	145.85	T	T	T	T
Playmaker	ZZPM7160	6ft TWISTED CLIMBER	$ 3,042	128.99	T	T	T	T
Playmaker	ZZPM7160S	6ft TWISTED CLIMBER (SURFACE MOUNT)	$ 3,042	128.87	T	T	T	T
Playmaker	ZZPM7166	7ft TWISTED CLIMBER	$ 3,140	135.25	T	T	T	T
Playmaker	ZZPM7166S	7ft TWISTED CLIMBER (SURFACE MOUNT)	$ 3,140	135.03	T	T	T	T
Playmaker	ZZPM7167	8ft TWISTED CLIMBER	$ 3,166	142.07	T	T	T	T
Playmaker	ZZPM7167S	8ft TWISTED CLIMBER (SURFACE MOUNT)	$ 3,166	141.63	T	T	T	T
Playmaker	ZZPM7168	6ft TOWER CLIMBER	$ 2,725	112.11	T	T	T	T
Playmaker	ZZPM7168S	6ft TOWER CLIMBER (SURFACE MOUNT)	$ 2,725	114.86	T	T	T	T
Playmaker	ZZPM7169	7ft TOWER CLIMBER	$ 2,850	119.26	T	T	T	T
Playmaker	ZZPM7169S	7ft TOWER CLIMBER (SURFACE MOUNT)	$ 2,850	122.56	T	T	T	T
Playmaker	ZZPM7170	8ft TOWER CLIMBER	$ 2,966	126.96	T	T	T	T
Playmaker	ZZPM7170S	8ft TOWER CLIMBER (SURFACE MOUNT)	$ 2,966	129.16	T	T	T	T
Playmaker	ZZPM7178	ANGLED CLIMBER SMALL (24in DECK)	$ 1,943	70.13	T	T	T	T
Playmaker	ZZPM7179	ANGLED CLIMBER SMALL (36in DECK)	$ 1,943	73.03	T	T	T	T
Playmaker	ZZPM7180	ANGLED CLIMBER SMALL (48in DECK)	$ 2,020	74.33	T	T	T	T
Playmaker	ZZPM7189	ANGLED CLIMBER LARGE (48in DECK)	$ 2,020	76.53	T	T	T	T
Playmaker	ZZPM7190	ANGLED CLIMBER LARGE (60in DECK)	$ 2,082	79.03	T	T	T	T
Playmaker	ZZPM7196	ANGLED CLIMBER LARGE (72in DECK)	$ 2,082	81.33	T	T	T	T
Playmaker	ZZPM7217	36in ROPE ASCENSION	$ 2,708	90.43	T	T	T	T
Playmaker	ZZPM7217S	36in ROPE ASCENSION (SURFACE MOUNT)	$ 2,708	84.81	T	T	T	T
Playmaker	ZZPM7218	48in ROPE ASCENSION	$ 2,872	97.46	T	T	T	T
Playmaker	ZZPM7218S	48in ROPE ASCENSION (SURFACE MOUNT)	$ 2,872	91.66	T	T	T	T
Playmaker	ZZPM7219	60in ROPE ASCENSION	$ 3,581	104.29	T	T	T	T
Playmaker	ZZPM7219S	60in ROPE ASCENSION (SURFACE MOUNT)	$ 3,581	98.79	T	T	T	T
Playmaker	ZZPM7226	ROPE CLIMBER (36in DECK)	$ 2,584	58.78	T	T	T	T
Playmaker	ZZPM7226S	ROPE CLIMBER (36in DECK) (SURFACE MOUNT	$ 2,584	56.70	T	T	T	T
Playmaker	ZZPM7227	ROPE CLIMBER (48in DECK)	$ 2,872	62.08	T	T	T	T
Playmaker	ZZPM7227S	ROPE CLIMBER (48in DECK) (SURFACE MOUNT)	$ 2,872	60.00	T	T	T	T
Playmaker	ZZPM7236	ROPE LADDER - 36IN DECK	$ 1,841	63.60	T	T	T	T
Playmaker	ZZPM7236S	ROPE LADDER - 36IN DECK (SURFACE MOUNT)	$ 1,841	59.30	T	T	T	T
Playmaker	ZZPM7237	ROPE LADDER - 48IN DECK	$ 2,009	65.35	T	T	T	T
Playmaker	ZZPM7237S	ROPE LADDER - 48IN DECK (SURFACE MOUNT)	$ 2,009	60.03	T	T	T	T
Playmaker	ZZPM7238	ROPE LADDER - 60IN DECK	$ 2,173	66.15	T	T	T	T
Playmaker	ZZPM7238S	ROPE LADDER - 60IN DECK (SURFACE MOUNT)	$ 2,173	60.83	T	T	T	T
Playmaker	ZZPM7239	ROPE LADDER - 72IN DECK	$ 2,344	66.95	T	T	T	T
Playmaker	ZZPM7239S	ROPE LADDER - 72IN DECK (SURFACE MOUNT)	$ 2,344	61.63	T	T	T	T
Playmaker	ZZPM7327	6in RISE DK-DK WHEELCHAIR RAMP W/ BARRIERS	$ 4,790	283.00	T	T	T	F
Playmaker	ZZPM7328	6in RISE DK-DK WHEELCHAIR RAMP W/ GUARDRAILS	$ 3,490	201.60	T	T	T	F
Playmaker	ZZPM7329	6in RISE DK-DK WHEELCHAIR RAMP W/ BARRIERS (EN VERSION)	$ 4,625	263.20	F	F	F	T
Playmaker	ZZPM7330	AEROGLIDER DECK EXTENSION FOR WHEELCHAIR RAMPS	$ 891	61.32	T	T	T	T
Playmaker	ZZPM7330S	AEROGLIDER DECK EXTENSION FOR WHEELCHAIR RAMPS (SURF MNT)	$ 891	61.32	T	T	T	T
Playmaker	ZZPM7376	GROUND TO DECK (12in RISE) WHEELCHAIR RAMP w/BARRIERS EN	$ 9,773	530.84	F	F	F	T
Playmaker	ZZPM7377	DECK TO DECK WHEELCHAIR RAMP w/BARRIERS (12in RISE) EN	$ 8,757	521.3	F	F	F	T
Playmaker	ZZPM7400	DEEP RUNG ARCH CLIMBER (36in DECK)	$ 2,288	95.42	T	T	T	T
Playmaker	ZZPM7400S	DEEP RUNG ARCH CLIMBER (36in DECK) (SURFACE MOUNT)	$ 2,288	97.22	T	T	T	T
Playmaker	ZZPM7410	DEEP RUNG ARCH CLIMBER (48in DECK)	$ 2,288	112.22	T	T	T	T
Playmaker	ZZPM7410S	DEEP RUNG ARCH CLIMBER (48in DECK) (SURFACE MOUNT)	$ 2,288	114.12	T	T	T	T
Playmaker	ZZPM7420	DEEP RUNG ARCH CLIMBER (60in DECK)	$ 2,987	118.82	T	T	T	T
Playmaker	ZZPM7420S	DEEP RUNG ARCH CLIMBER (60in DECK) (SURFACE MOUNT)	$ 2,987	120.72	T	T	T	T
Playmaker	ZZPM7430	DEEP RUNG ARCH CLIMBER (72in DECK)	$ 2,987	130.02	T	T	T	T
Playmaker	ZZPM7430S	DEEP RUNG ARCH CLIMBER (72in DECK) (SURFACE MOUNT)	$ 2,987	131.82	T	T	T	T

Playmaker	ZZPM7439	ROCK CLIMBER (48in DECK)	$ 2,479	153.48	T	T	T	T
Playmaker	ZZPM7439S	ROCK CLIMBER (48in DECK) (SURFACE MOUNT)	$ 2,479	145.48	T	T	T	T
Playmaker	ZZPM7536	GROUND TO DECK WHEELCHAIR RAMP W/ BARRIERS (12in RISE)	$ 9,784	550.64	T	T	T	F
Playmaker	ZZPM7537	GROUND TO DECK WHEELCHAIR RAMP W/ GUARDRAILS (12in RISE)	$ 7,301	388.84	T	T	T	F
Playmaker	ZZPM7538	DECK TO DECK WHEELCHAIR RAMP W/ BARRIERS (12in RISE)	$ 9,522	541.10	T	T	T	F
Playmaker	ZZPM7539	DECK TO DECK WHEELCHAIR RAMP W/ GUARDRAILS (12in RISE)	$ 7,039	379.30	T	T	T	F
Playmaker	ZZPM7547	DECK TO DECK WHEELCHAIR RAMP W/ GUARDRAILS (FLAT)	$ 6,246	380.70	T	T	T	F
Playmaker	ZZPM7606	DECK-DECK WIDE FLAT WHEELCHAIR RAMP W/ GUARDRAILS	$ 7,935	481.70	T	T	T	F
Playmaker	ZZPM7607	DECK-DECK WIDE FLAT WHEELCHAIR RAMP W/ BARRIERS	$ 10,308	641.90	T	T	T	F
Playmaker	ZZPM7608	DECK-DECK WIDE FLAT WHEELCHAIR RAMP W/ BARRIERS FOR EN	$ 10,068	620.10	T	T	T	T
Playmaker	ZZPM7616	DECK-DECK WIDE WHEELCHAIR RAMP W/ GUARDRAILS (12IN RISE)	$ 7,895	481.70	T	T	T	F
Playmaker	ZZPM7617	DECK-DECK WIDE WHEELCHAIR RAMP W/ BARRIERS (12IN RISE)	$ 10,347	641.90	T	T	T	F
Playmaker	ZZPM7618	DECK-DECK WIDE WHEELCHAIR RAMP W/ BARRIERS FOR EN (12IN RISE)	$ 10,064	620.10	T	T	T	T
Playmaker	ZZPM7626	GRND-DECK WIDE WHEELCHAIR RAMP W/ GUARDRAILS	$ 8,076	492.00	T	T	T	F
Playmaker	ZZPM7627	GRND-DECK WIDE WHEELCHAIR RAMP W/ BARRIERS	$ 10,490	652.20	T	T	T	F
Playmaker	ZZPM7628	GRND-DECK WIDE WHEELCHAIR RAMP W/ BARRIERS FOR EN	$ 10,242	630.40	T	T	T	T
Playmaker	ZZPM7657	SOLAR CLIMBER (36in & 30in DECKS)	$ 2,948	90.97	T	T	T	T
Playmaker	ZZPM7657S	SOLAR CLIMBER (36in & 30in DECKS) (SURFACE MOUNT)	$ 2,948	91.32	T	T	T	T
Playmaker	ZZPM7658	SOLAR CLIMBER (48in DECK)	$ 3,283	115.87	T	T	T	T
Playmaker	ZZPM7658S	SOLAR CLIMBER (48in DECK) (SURFACE MOUNT)	$ 3,283	112.92	T	T	T	T
Playmaker	ZZPM7659	SOLAR CLIMBER (60in DECK)	$ 3,610	126.92	T	T	T	T
Playmaker	ZZPM7659S	SOLAR CLIMBER (60in DECK) (SURFACE MOUNT)	$ 3,610	123.17	T	T	T	T
Playmaker	ZZPM7666	SOLAR CLIMBER (72in DECK)	$ 4,008	140.17	T	T	T	T
Playmaker	ZZPM7666S	SOLAR CLIMBER (72in DECK) (SURFACE MOUNT)	$ 4,008	104.53	T	T	T	T
Playmaker	ZZPM7940	UPPER SILO CLIMBER	$ 3,545	163.48	T	T	T	T
Playmaker	ZZPM7941	PM UPPER SILO CLIMBER CLAMP LEFT	$ 3,559	165.70	T	T	T	T
Playmaker	ZZPM7942	PM UPPER SILO CLIMBER CLAMP RIGHT	$ 3,559	165.70	T	T	T	T
Playmaker	ZZPM7948	SILO CLIMBER (24in DECK)	$ 1,583	70.00	T	T	T	T
Playmaker	ZZPM7948S	SILO CLIMBER (24in DECK) (SURFACE MOUNT)	$ 1,583	67.80	T	T	T	T
Playmaker	ZZPM7949	SILO CLIMBER (36in DECK)	$ 1,637	73.85	T	T	T	T
Playmaker	ZZPM7949S	SILO CLIMBER (36in DECK) (SURFACE MOUNT)	$ 1,637	71.65	T	T	T	T
Playmaker	ZZPM7950	SILO CLIMBER (48in DECK)	$ 1,681	77.70	T	T	T	T
Playmaker	ZZPM7950S	SILO CLIMBER (48in DECK) (SURFACE MOUNT)	$ 1,681	76.05	T	T	T	T
Playmaker	ZZPM7956	SILO CLIMBER (60in DECK)	$ 1,732	81.77	T	T	T	T
Playmaker	ZZPM7956S	SILO CLIMBER (60in DECK) (SURFACE MOUNT)	$ 1,732	81.00	T	T	T	T
Playmaker	ZZPM7957	SILO CLIMBER (72in DECK)	$ 1,780	85.84	T	T	T	T
Playmaker	ZZPM7957S	SILO CLIMBER (72in DECK) (SURFACE MOUNT)	$ 1,780	83.64	T	T	T	T
Playmaker	ZZPM7966	ROCKY RIDGE CLIMBER (60in DECK)	$ 2,981	123.05	T	T	T	T
Playmaker	ZZPM7966S	ROCKY RIDGE CLIMBER (60in DECK) (SURFACE MOUNT)	$ 2,981	113.34	T	T	T	T
Playmaker	ZZPM8060	SLIDING POLE (36in DECK)	$ 1,383	66.27	T	T	T	T
Playmaker	ZZPM8060S	SLIDING POLE (36in DECK) (SURFACE MOUNT)	$ 1,383	67.53	T	T	T	T
Playmaker	ZZPM8070	SLIDING POLE (48in DECK)	$ 1,393	68.17	T	T	T	T
Playmaker	ZZPM8070S	SLIDING POLE (48in DECK) (SURFACE MOUNT)	$ 1,393	69.33	T	T	T	T
Playmaker	ZZPM8080	SLIDING POLE (60in DECK)	$ 1,409	69.47	T	T	T	T
Playmaker	ZZPM8080S	SLIDING POLE (60in DECK) (SURFACE MOUNT)	$ 1,409	70.12	T	T	T	T
Playmaker	ZZPM8090	SLIDING POLE (72in DECK)	$ 1,415	71.37	T	T	T	T
Playmaker	ZZPM8090S	SLIDING POLE (72in DECK) (SURFACE MOUNT)	$ 1,415	73.53	T	T	T	T
Playmaker	ZZPM8100	BEANSTALK CLIMBER (36in DECK)	$ 2,201	80.97	T	T	T	T
Playmaker	ZZPM8100S	BEANSTALK CLIMBER (36in DECK) (SURFACE MOUNT)	$ 2,201	81.42	T	T	T	T
Playmaker	ZZPM8110	BEANSTALK CLIMBER (48in DECK)	$ 2,475	88.61	T	T	T	T
Playmaker	ZZPM8110S	BEANSTALK CLIMBER (48in DECK) (SURFACE MOUNT)	$ 2,475	89.16	T	T	T	T
Playmaker	ZZPM8120	BEANSTALK CLIMBER (60in DECK)	$ 2,747	96.65	T	T	T	T
Playmaker	ZZPM8120S	BEANSTALK CLIMBER (60in DECK) (SURFACE MOUNT)	$ 2,747	96.40	T	T	T	T
Playmaker	ZZPM8130	BEANSTALK CLIMBER (72in DECK)	$ 2,987	103.79	T	T	T	T
Playmaker	ZZPM8130S	BEANSTALK CLIMBER (72in DECK) (SURFACE MOUNT)	$ 2,987	102.84	T	T	T	T
Playmaker	ZZPM8140	SPIRAL CLIMBER (36in DECK)	$ 1,943	91.17	T	T	T	T
Playmaker	ZZPM8140S	SPIRAL CLIMBER (36in DECK) (SURFACE MOUNT)	$ 1,943	91.52	T	T	T	T
Playmaker	ZZPM8150	SPIRAL CLIMBER (48in DECK)	$ 2,048	97.67	T	T	T	T
Playmaker	ZZPM8150S	SPIRAL CLIMBER (48in DECK) (SURFACE MOUNT)	$ 2,048	93.82	T	T	T	T
Playmaker	ZZPM8160	SPIRAL CLIMBER (60in DECK)	$ 2,082	103.67	T	T	T	T
Playmaker	ZZPM8160S	SPIRAL CLIMBER (60in DECK) (SURFACE MOUNT)	$ 2,082	105.42	T	T	T	T
Playmaker	ZZPM8170	SPIRAL CLIMBER (72in DECK)	$ 2,147	109.77	T	T	T	T
Playmaker	ZZPM8170S	SPIRAL CLIMBER (72in DECK) (SURFACE MOUNT)	$ 2,147	111.92	T	T	T	T
Playmaker	ZZPM8180	TREE CLIMBER (36in DECK)	$ 2,026	80.27	T	T	T	T
Playmaker	ZZPM8180S	TREE CLIMBER (36in DECK) (SURFACE MOUNT)	$ 2,026	80.42	T	T	T	T
Playmaker	ZZPM8190	TREE CLIMBER (48in DECK)	$ 2,082	85.27	T	T	T	T
Playmaker	ZZPM8190S	TREE CLIMBER (48in DECK) (SURFACE MOUNT)	$ 2,082	86.02	T	T	T	T
Playmaker	ZZPM8200	TREE CLIMBER (60in DECK)	$ 2,151	96.37	T	T	T	T
Playmaker	ZZPM8200S	TREE CLIMBER (60in DECK) (SURFACE MOUNT)	$ 2,151	91.32	T	T	T	T
Playmaker	ZZPM8210	TREE CLIMBER (72in DECK)	$ 2,205	95.57	T	T	T	T
Playmaker	ZZPM8210S	TREE CLIMBER (72in DECK) (SURFACE MOUNT)	$ 2,205	94.12	T	T	T	T
Playmaker	ZZPM8230	DECK TO DECK ACCESSIBLE CLIMBER (24in RISE)	$ 7,432	321.20	T	T	T	T
Playmaker	ZZPM8256	48in PLAYWOOD CLIMBER	$ 1,998	95.10	T	T	T	T
Playmaker	ZZPM8256S	48in PLAYWOOD CLIMBER (SM)	$ 1,998	98.07	T	T	T	T
Playmaker	ZZPM8257	60in PLAYWOOD CLIMBER	$ 2,026	97.52	T	T	T	T
Playmaker	ZZPM8257S	60in PLAYWOOD CLIMBER (SM)	$ 2,026	100.60	T	T	T	T
Playmaker	ZZPM8258	72in PLAYWOOD CLIMBER	$ 2,129	106.90	T	T	T	T
Playmaker	ZZPM8258S	72in PLAYWOOD CLIMBER (SM)	$ 2,129	109.98	T	T	T	T
Playmaker	ZZPM8260	HOPSCOTCH CLIMBER (48in DECK)	$ 2,140	87.02	T	T	T	T
Playmaker	ZZPM8260S	HOPSCOTCH CLIMBER (48in DECK) (SURFACE MOUNT)	$ 2,140	88.86	T	T	T	T
Playmaker	ZZPM8266	48" SINGLE FLEX TREAD	$ 3,195	135.59	T	T	T	T
Playmaker	ZZPM8266S	48" SINGLE FLEX TREAD (SM)	$ 3,195	107.79	T	T	T	T
Playmaker	ZZPM8267	60" SINGLE FLEX TREAD	$ 3,195	135.59	T	T	T	T
Playmaker	ZZPM8267S	60" SINGLE FLEX TREAD (SM)	$ 3,195	107.79	T	T	T	T
Playmaker	ZZPM8268	48" DOUBLE FLEX TREAD	$ 4,844	208.71	T	T	T	T
Playmaker	ZZPM8268S	48" DOUBLE FLEX TREAD (SM)	$ 4,844	151.88	T	T	T	T
Playmaker	ZZPM8269	60" DOUBLE FLEX TREAD	$ 4,844	208.71	T	T	T	T
Playmaker	ZZPM8269S	60" DOUBLE FLEX TREAD (SM)	$ 4,844	151.88	T	T	T	T
Playmaker	ZZPM8270	HOPSCOTCH CLIMBER (60in DECK)	$ 2,457	96.46	T	T	T	T
Playmaker	ZZPM8270S	HOPSCOTCH CLIMBER (60in DECK) (SURFACE MOUNT)	$ 2,457	98.26	T	T	T	T
Playmaker	ZZPM8280	HOPSCOTCH CLIMBER (72in DECK)	$ 2,529	101.06	T	T	T	T

Playmaker	ZZPM8280S	HOPSCOTCH CLIMBER (72in DECK) (SURFACE MOUNT)	$ 2,529	102.86	T	T	T	T
Playmaker	ZZPM8289	RIBBON CLIMBER (36in DECK)	$ 1,147	51.98	T	T	T	T
Playmaker	ZZPM8289S	RIBBON CLIMBER (36in DECK) SURFACE MOUNT	$ 1,147	54.58	T	T	T	T
Playmaker	ZZPM8290	RIBBON CLIMBER (48in DECK)	$ 1,339	55.68	T	T	T	T
Playmaker	ZZPM8290S	RIBBON CLIMBER (48in DECK) (SURFACE MOUNT)	$ 1,339	58.48	T	T	T	T
Playmaker	ZZPM8300	RIBBON CLIMBER (60in DECK)	$ 1,383	58.88	T	T	T	T
Playmaker	ZZPM8300S	RIBBON CLIMBER (60in DECK) (SURFACE MOUNT)	$ 1,383	62.58	T	T	T	T
Playmaker	ZZPM8310	RIBBON CLIMBER (72in DECK)	$ 1,437	63.78	T	T	T	T
Playmaker	ZZPM8310S	RIBBON CLIMBER (72in DECK) (SURFACE MOUNT)	$ 1,437	67.38	T	T	T	T
Playmaker	ZZPM8338	STEEL SPINE CLIMBER (TRIPPPLE SLIDE)	$ 928	37.66	T	T	T	T
Playmaker	ZZPM8338S	STEEL SPINE CLIMBER (TRIPPPLE SLIDE) (SM)	$ 928	39.64	T	T	T	T
Playmaker	ZZPM8339	STEEL SPINE CLIMBER	$ 1,222	67.07	T	T	T	T
Playmaker	ZZPM8339S	STEEL SPINE CLIMBER (SM)	$ 1,222	69.05	T	T	T	T
Playmaker	ZZPM8346	SPINE CLIMBER TO TRIPPPLE RACER SLIDE	$ 994	50.66	T	T	T	T
Playmaker	ZZPM8346S	SPINE CLIMBER TO TRIPPPLE RACER SLIDE (SURFACE MOUNT)	$ 994	49.16	T	T	T	T
Playmaker	ZZPM8388	THE WALL	$ 6,235	87.38	T	T	T	T
Playmaker	ZZPM8389	THE CRISS CROSS	$ 6,809	189.39	T	T	T	T
Playmaker	ZZPM8389S	THE CRISS CROSS (SURFACE MOUNT)	$ 6,809	195.55	T	T	T	T
Playmaker	ZZPM8390	THE STUMP JUMP	$ 3,538	199.30	T	T	T	T
Playmaker	ZZPM8390S	THE STUMP JUMP (SURFACE MOUNT)	$ 3,538	208.54	T	T	T	T
Playmaker	ZZPM8397	THE WACKY LOG	$ 4,444	202.01	T	T	T	T
Playmaker	ZZPM8397S	THE WACKY LOG (SURFACE MOUNT)	$ 4,444	161.55	T	T	T	T
Playmaker	ZZPM8398	THE HELIX	$ 2,300	85.74	T	T	T	T
Playmaker	ZZPM8399	THE WAVE	$ 1,699	70.55	T	T	T	T
Playmaker	ZZPM8408	THE GRID	$ 2,322	107.63	T	T	T	T
Playmaker	ZZPM8449	THE ROPE LINK CLIMBER	$ 1,524	38.36	T	T	T	T
Playmaker	ZZPM8450	THE SKY LINK	$ 1,103	55.09	T	T	T	T
Playmaker	ZZPM8456	THE SKY ARCH	$ 1,131	45.74	T	T	T	T
Playmaker	ZZPM8457	THE CRATER ARCH	$ 2,588	81.48	T	T	T	F
Playmaker	ZZPM8457S	THE CRATER ARCH (SURFACE MOUNT)	$ 2,588	82.36	T	T	T	F
Playmaker	ZZPM8460	THE CRATER WALL	$ 5,106	192.03	T	T	T	T
Playmaker	ZZPM8466	THE CRATER LADDER	$ 2,533	83.58	T	T	T	T
Playmaker	ZZPM8467	THE VERTICAL WAVE	$ 1,627	66.12	T	T	T	T
Playmaker	ZZPM8468	THE SPACER	$ 360	13.18	T	T	T	T
Playmaker	ZZPM8478	6ft TIMBER TRAIL BRIDGE	$ 5,281	156.70	T	T	T	T
Playmaker	ZZPM8479	10ft TIMBER TRAIL BRIDGE	$ 7,202	230.40	T	T	T	T
Playmaker	ZZPM8480	6ft RIPPLE BRIDGE	$ 3,877	162.32	T	T	T	T
Playmaker	ZZPM8486	10ft RIPPLE BRIDGE	$ 5,205	219.08	T	T	T	T
Playmaker	ZZPM8589	CUSTOM GRAPHIC FLAG WITH 1	$ 913	14.39	T	T	T	T
Playmaker	ZZPM8606	COZY COCOON - STATIONARY	$ 2,741	171.17	T	T	T	T
Playmaker	ZZPM8606S	COZY COCOON - STATIONARY (SM)	$ 2,820	163.47	T	T	T	T
Playmaker	ZZPM8816	BEDROCK TRANSFER - 36IN RAIL	$ 9,653	802.9	F	F	F	F
Playmaker	ZZPM8817	BEDROCK TRANSFER - 36IN TALL RAIL	$ 9,550	806.9	F	F	F	F
Playmaker	ZZPM8818	BEDROCK TRANSFER - 36IN BARRIER	$ 10,250	856.54	F	F	F	F
Playmaker	ZZPM8819	BEDROCK TRANSFER - 48IN BARRIER	$ 10,750	949.39	F	F	F	F
Playmaker	ZZPM8939	PLAYCUBES TRANSITION CLIMBER	$ 1,299	94.06	T	T	T	T
Playmaker	ZZPM9059	36in CSA PERFORATED STAIR	$ 2,529	121.52	T	T	T	F
Playmaker	ZZPM9059S	36in CSA PERFORATED STAIR (SURF MOUNT)	$ 2,529	125.52	T	T	T	F
Playmaker	ZZPM9069	48in CSA PERFORATED STAIR	$ 2,751	144.32	T	T	T	F
Playmaker	ZZPM9069S	48in CSA PERFORATED STAIR (SURF MOUNT)	$ 2,751	148.32	T	T	T	F
Playmaker	ZZPM9076	OVAL CRATER WALL	$ 6,333	216.48	T	T	T	T
Playmaker	ZZPM9076S	OVAL CRATER WALL	$ 6,333	221.28	T	T	T	T
Playmaker	ZZPM9077	OVAL CRATER ARCH	$ 3,134	101.15	T	T	T	T
Playmaker	ZZPM9077S	OVAL CRATER ARCH	$ 3,134	105.95	T	T	T	T
Playmaker	ZZPM9079	TRI JUNCTION	$ 2,348	95.38	T	T	T	T
Playmaker	ZZPM9080	QUAD JUNCTION	$ 3,331	133.40	T	T	T	T
Playmaker	ZZPM9086	DUPLEX CLIMBER	$ 5,161	217.43	T	T	T	T
Playmaker	ZZPM9086S	DUPLEX CLIMBER	$ 5,161	186.06	T	T	T	T
Playmaker	ZZPM9087	THE CROSSOVER	$ 4,739	192.52	T	T	T	T
Playmaker	ZZPM9087S	THE CROSSOVER	$ 4,739	182.06	T	T	T	T
Playmaker	ZZPM9088	ADVENTURE SLIDE	$ 5,842	349.32	T	T	T	T
Playmaker	ZZPM9088S	ADVENTURE SLIDE	$ 5,842	330.12	T	T	T	T
Playmaker	ZZPM9089	ADVENTURE SLIDE - RIGHT ARCH	$ 6,607	353.30	T	T	T	T
Playmaker	ZZPM9089S	ADVENTURE SLIDE - RIGHT ARCH	$ 6,607	328.87	T	T	T	T
Playmaker	ZZPM9090	ADVENTURE SLIDE - LEFT ARCH	$ 6,607	353.30	T	T	T	T
Playmaker	ZZPM9090S	ADVENTURE SLIDE - LEFT ARCH	$ 6,607	328.87	T	T	T	T
Playmaker	ZZPM9156	COATED STAIRS (18in DECK)	$ 1,212	55.20	T	T	T	T
Playmaker	ZZPM9156S	COATED STAIRS (18in DECK) (SURFACE MOUNT)	$ 1,212	60.18	T	T	T	T
Playmaker	ZZPM9157	COATED STAIRS (24in DECK)	$ 1,802	85.88	T	T	F	F
Playmaker	ZZPM9157S	COATED STAIRS (24in DECK) (SURFACE MOUNT)	$ 1,802	89.88	T	T	F	F
Playmaker	ZZPM9158	COATED STAIRS (36in DECK)	$ 2,413	110.68	T	T	F	F
Playmaker	ZZPM9158S	COATED STAIRS (36in DECK) (SURFACE MOUNT)	$ 2,413	114.68	T	T	F	F
Playmaker	ZZPM9159	COATED STAIRS (48in DECK)	$ 2,463	129.88	T	T	F	F
Playmaker	ZZPM9159S	COATED STAIRS (48in DECK) (SURFACE MOUNT)	$ 2,463	133.88	T	T	F	F
Playmaker	ZZPM9160	COATED LADDER (60in DECK)	$ 2,834	132.34	T	T	T	T
Playmaker	ZZPM9160S	COATED LADDER (60in DECK)(SURFACE MOUNT)	$ 2,834	136.14	T	T	T	T
Playmaker	ZZPM9166	COATED LADDER (72in DECK)	$ 3,462	151.34	T	T	T	T
Playmaker	ZZPM9166S	COATED LADDER (72in DECK) (SURFACE MOUNT)	$ 3,462	155.14	T	T	T	T
Playmaker	ZZPM9168	12in ACCESSIBLE STEPPED PLATFORM (DECK TO DECK)	$ 2,322	94.46	T	T	T	T
Playmaker	ZZPM9170	24in ACCESSIBLE STEPPED PLATFORM (DECK TO DECK)	$ 3,490	174.86	T	T	T	T
Playmaker	ZZPM9177	36in ACCESSIBLE STEPPED PLATFORM (DECK TO DECK)	$ 5,128	286.99	T	T	T	T
Playmaker	ZZPM9189	18in ACCESSIBLE STEPPED PLATFORM (DECK TO DECK)	$ 3,217	136.32	T	T	T	T
Playmaker	ZZPM9580	SLIDE-A-SIDE SLIDE - BALCONY & BARRIERS	$ 1,995	107.3	T	T	T	T
Playmaker	ZZPM9581	SLIDE-A-SIDE SLIDE - STANDARD BARRIER	$ 1,349	45.4	T	T	T	T
Playmaker	ZZPM9606	PLAYWOOD SINGLE PEAK ROOF	$ 4,058	297.09	T	T	T	T
Playmaker	ZZPM9607	PLAYWOOD EXTENDED PEAK ROOF	$ 6,617	496.98	T	T	T	T
Playmaker	ZZPM9616	PLAYWOOD SINGLE SLANT ROOF	$ 2,981	258.25	T	T	T	T
Playmaker	ZZPM9626	SQUARE PEAK ROOF	$ 6,962	285.55	T	T	T	T
Playmaker	ZZPM9627	EXTENDED SQUARE PEAK ROOF	$ 10,133	440.58	T	T	T	T
Playmaker	ZZPM9628	SLANTED CORRUGATED ROOF	$ 4,877	300.57	T	T	T	T
Playmaker	ZZPM9698	16ft SHADE CANOPY	$ 3,872	18.50	T	T	T	T

Playmaker	ZZPM9699	20ft SHADE CANOPY	$ 4,597	24.00	T	T	T	T
Playmaker	ZZPM9708	MODULAR HYPAR (PM)	$ 6,602	209.45	T	T	T	T
Playmaker	ZZPM9710	INTEGRATED 30 X 30 SHADE	$ 15,629	1867	T	T	T	F
Playmaker	ZZPM9720	HEX TOWER CONTAINMENT ROOF	$ 5,499	226.60	T	T	T	T
Playmaker	ZZPM9726	PM SQUARE HAT POST BRACES	$ 1,693	104.30	T	T	T	T
Playmaker	ZZPM9727	PM HEX HAT POST BRACES	$ 2,522	156.40	T	T	T	T
Playmaker	ZZPM9806	SMALL TREE TOPPER	$ 400	14.06	T	T	T	T
Playmaker	ZZPM9807	LARGE TREE TOPPER	$ 688	30.03	T	T	T	T
Playmaker	ZZPM9809	PALM TREE TOPPER	$ 458	14.33	T	T	T	T
Playmaker	ZZPM9816	CAMBER 1/2 SQUARE ROOF	$ 1,448	51.67	T	T	T	T
Playmaker	ZZPM9817	CAMBER 1/2 SQUARE ROOF ADD ON SECTION	$ 1,328	49.01	T	T	T	T
Playmaker	ZZPM9818	CAMBER HALF HEX ROOF	$ 5,066	180.89	T	T	T	T
Playmaker	ZZPM9819	CAMBER HEX ROOF	$ 9,660	349.52	T	T	T	T
Playmaker	ZZPM9820	CAMBER OPEN HEX ROOF	$ 5,358	191.13	T	T	T	T
Playmaker	ZZPM9828	CARNIVAL ROOF - SMALL PERF (SQUARE)	$ 2,205	133.26	T	T	T	T
Playmaker	ZZPM9837	CARNIVAL ROOF - SMALL PERF (EXTENDED SQUARE)	$ 3,992	240.26	T	T	T	F
Playmaker	ZZPM9841	PINE TREE POST TOPPER	$ 445	23.9	T	T	T	T
Playmaker	ZZPM9842	SOCCER BALL POST TOPPER	$ 455	24.5	T	T	T	T
Playmaker	ZZPM9843	BASEBALL POST TOPPER	$ 186	9.8	T	T	T	T
Playmaker	ZZPM9844	HOCKEY STICK POST TOPPER	$ 1,525	47.7	T	T	T	T
Playmaker	ZZPM9846	CABANA ROOF	$ 2,064	123.05	T	T	T	F
Playmaker	ZZPM9847	SMALL LOLLITOPS	$ 382	15.04	T	T	T	T
Playmaker	ZZPM9848	MEDIUM LOLLITOPS	$ 607	29.04	T	T	T	T
Playmaker	ZZPM9849	LARGE LOLLITOPS	$ 960	50.04	T	T	T	T
Playmaker	ZZPM9856	CARNIVAL ROOF SQUARE CAP	$ 295	6.11	T	T	T	T
Playmaker	ZZPM9858	PM HEX CABANA ROOF	$ 4,772	300.63	T	T	T	T
Playmaker	ZZPM9859	LOLLI CAP	$ 207	5.03	T	T	T	T
Playmaker	ZZPM9867	NUVO ROOF	$ 2,763	103.76	T	T	T	T
Playmaker	ZZPM9868	NUVO SWIRL ROOF	$ 2,511	140.04	T	T	T	T
Playmaker	ZZPM9887	CARNIVAL ROOF - SMALL PERF (HEX)	$ 3,501	268.37	T	T	T	T
Playmaker	ZZPM9896	CARNIVAL ROOF - SMALL PERF (EXTENDED HEX)	$ 5,890	429.76	T	T	T	T
Playmaker	ZZPM9898	CARNIVAL ROOF HEX CAP	$ 495	6.11	T	T	T	T
Playmaker	ZZPM9906	CARNIVAL ROOF EXTENDED HEX CAP	$ 480	6.68	T	T	T	T

Category	Part Number	DESCRIPTION	List Price ($ USD)	Weight (lbs)	ASTM Certified	CPSC Compliant	CSA Certified	EN Certified
RockBlocks	ZZUN0158	ROCKBLOCKS Z SUPPORT FILLER(60in WALL)	$ 327	6.85	T	T	T	T
RockBlocks	ZZUN0159	ROCKBLOCKS Z SUPPORT FILLER(84in WALL)	$ 327	9.69	T	T	T	T
RockBlocks	ZZUN0166	ROCKBLOCKS DECK ACCESS SUPPORT(12in - 24in DECK)	$ 502	36.42	T	T	T	T
RockBlocks	ZZUN0166S	ROCKBLOCKS DECK ACCESS SUPPORT(12in - 24in DECK)(SURF MNT)	$ 502	35.62	T	T	T	T
RockBlocks	ZZUN0167	ROCKBLOCKS DECK ACCESS SUPPORT(36in - 48in DECK)	$ 793	43.86	T	T	T	T
RockBlocks	ZZUN0167S	ROCKBLOCKS DECK ACCESS SUPPORT(36in - 48in DECK)(SURF MNT)	$ 793	42.86	T	T	T	T
RockBlocks	ZZUN0168	ROCKBLOCKS DECK ACCESS SUPPORT(60in - 72in DECK)	$ 1,190	57.11	T	T	T	T
RockBlocks	ZZUN0168S	ROCKBLOCKS DECK ACCESS SUPPORT(60in - 72in DECK)(SURF MNT)	$ 1,190	53.36	T	T	T	T
RockBlocks	ZZUN0169	ROCKBLOCKS Z SUPPORT (RAISED60in WALL)	$ 808	59.01	T	T	T	T
RockBlocks	ZZUN0169S	ROCKBLOCKS Z SUPPORT (RAISED60in WALL)(SURFACE MOUNT)	$ 808	47.01	T	T	T	T
RockBlocks	ZZUN0176	ROCKBLOCKS Z SUPPORT(60in WALL)	$ 265	31.01	T	T	T	T
RockBlocks	ZZUN0176S	ROCKBLOCKS Z SUPPORT(60in WALL)(SURFACE MOUNT)	$ 265	30.51	T	T	T	T
RockBlocks	ZZUN0177	ROCKBLOCKS Z SUPPORT(84in WALL)	$ 356	39.41	T	T	T	T
RockBlocks	ZZUN0177S	ROCKBLOCKS Z SUPPORT(84in WALL)(SURFACE MOUNT)	$ 356	38.41	T	T	T	T
RockBlocks	ZZUN0178	ROCKBLOCKS END SUPPORT(60in WALL)	$ 295	30.62	T	T	T	T
RockBlocks	ZZUN0178S	ROCKBLOCKS END SUPPORT(60in WALL)(SURFACE MOUNT)	$ 295	30.12	T	T	T	T
RockBlocks	ZZUN0179	ROCKBLOCKS END SUPPORT(84in WALL)	$ 388	38.36	T	T	T	T
RockBlocks	ZZUN0179S	ROCKBLOCKS END SUPPORT(84in WALL)(SURFACE MOUNT)	$ 388	37.86	T	T	T	T
Challenger	ZZUN0656	CRE8PLAY - SMALL CADRE (UNIVERSAL)	$ 20,012	1500.00	F	F	F	F
UniversalMod	ZZUN1254	PLAYSOLEIL	$ 140	2.42	T	T	T	T
UniversalMod	ZZUN2019	APPROACH STEP FOR TRANSFERSTATION	$ 524	35.83	T	T	T	T
UniversalMod	ZZUN2019S	APPROACH STEP FOR TRANSFERSTATION (SURFACE MOUNT)	$ 524	41.73	T	T	T	T
UniversalMod	ZZUN2987	APPROACH STEP SURFACE MOUNT EXTENSION KIT	$ 61	5.03	F	F	F	F
UniversalMod	ZZUN2992	17ft TUBE SLIDE SUPPORT LEG W/ OUTRIGGERS	$ 1,983	233.3	T	T	T	T
UniversalMod	ZZUN2992S	17ft TUBE SLIDE SUPPORT LEG W/ OUTRIGGERS (SM)	$ 1,983	201.2	T	T	T	T
UniversalMod	ZZUN2993	16ft TUBE SLIDE SUPPORT LEG W/ OUTRIGGERS	$ 1,950	226.4	T	T	T	T
UniversalMod	ZZUN2993S	16ft TUBE SLIDE SUPPORT LEG W/ OUTRIGGERS (SM)	$ 1,950	194.3	T	T	T	T
UniversalMod	ZZUN2994	15ft TUBE SLIDE SUPPORT LEG W/ OUTRIGGERS	$ 1,928	219.6	T	T	T	T
UniversalMod	ZZUN2994S	15ft TUBE SLIDE SUPPORT LEG W/ OUTRIGGERS (SM)	$ 1,928	187.4	T	T	T	T
UniversalMod	ZZUN2995	14ft TUBE SLIDE SUPPORT LEG W/ OUTRIGGERS	$ 1,902	210.5	T	T	T	T
UniversalMod	ZZUN2995S	14ft TUBE SLIDE SUPPORT LEG W/ OUTRIGGERS (SM)	$ 1,902	180.5	T	T	T	T
UniversalMod	ZZUN2997	DOUBLE SLIDE SURFACE MOUNTEXTENSION KIT	$ 72	6.33	T	T	T	F
UniversalMod	ZZUN2998	TRIPPPLE SLIDE SURFACE MOUNTEXTENSION KIT	$ 87	11.73	T	T	T	F
UniversalMod	ZZUN3007	30in ROUND STRAIGHT TUBESECTION	$ 738	26.02	T	T	T	T
UniversalMod	ZZUN3008	30in ROUND LEFT TUBE SECTION	$ 742	26.02	T	T	T	T
UniversalMod	ZZUN3009	30in ROUND RIGHT TUBE SECTION	$ 738	26.02	T	T	T	T
UniversalMod	ZZUN3011	DO NOT CLIMB - SLIDE PANEL	$ 432	37.7	T	T	T	T
UniversalMod	ZZUN3014	13ft TUBE SLIDE SUPPORT LEG	$ 1,094	119.7	T	T	T	T
UniversalMod	ZZUN3014S	13ft TUBE SLIDE SUPPORT LEG (SM)	$ 1,094	111.4	T	T	T	T
UniversalMod	ZZUN3015	12ft TUBE SLIDE SUPPORT LEG	$ 676	112.8	T	T	T	T
UniversalMod	ZZUN3015S	12ft TUBE SLIDE SUPPORT LEG (SM)	$ 676	104.4	T	T	T	T
UniversalMod	ZZUN3019	ROUND SPIRAL TUBE SLIDE BENTLEG	$ 415	35.75	T	T	T	T
UniversalMod	ZZUN3019S	ROUND SPIRAL TUBE SLIDE BENTLEG (SURFACE MOUNT)	$ 415	34.65	T	T	T	T
UniversalMod	ZZUN3022	11ft TUBE SLIDE SUPPORT LEG	$ 557	60.5	T	T	T	T
UniversalMod	ZZUN3022S	11ft TUBE SLIDE SUPPORT LEG (SM)	$ 557	61	T	T	T	T
UniversalMod	ZZUN3023	10ft TUBE SLIDE SUPPORT LEG	$ 545	56.7	T	T	T	T
UniversalMod	ZZUN3023S	10ft TUBE SLIDE SUPPORT LEG (SM)	$ 545	57.2	T	T	T	T
UniversalMod	ZZUN3024	9ft TUBE SLIDE SUPPORT LEG	$ 432	52.9	T	T	T	T
UniversalMod	ZZUN3024S	9ft TUBE SLIDE SUPPORT LEG (SM)	$ 432	53.4	T	T	T	T
UniversalMod	ZZUN3025	8ft TUBE SLIDE SUPPORT LEG	$ 422	49.1	T	T	T	T
UniversalMod	ZZUN3025S	8ft TUBE SLIDE SUPPORT LEG (SM)	$ 422	49.6	T	T	T	T
UniversalMod	ZZUN3026	ROUND TUBE SLIDE SUPPORT LEG7ft	$ 305	25.08	T	T	T	T
UniversalMod	ZZUN3026S	ROUND TUBE SLIDE SUPPORT LEG7ft (SURFACE MOUNT)	$ 305	24.31	T	T	T	T
UniversalMod	ZZUN3027	ROUND TUBE SLIDE SUPPORT LEG6ft	$ 305	22.66	T	T	T	T
UniversalMod	ZZUN3027S	ROUND TUBE SLIDE SUPPORT LEG6ft (SURFACE MOUNT)	$ 305	21.89	T	T	T	T
UniversalMod	ZZUN3028	ROUND TUBE SLIDE SUPPORT LEG5ft	$ 305	20.35	T	T	T	T
UniversalMod	ZZUN3028S	ROUND TUBE SLIDE SUPPORT LEG5ft (SURFACE MOUNT)	$ 305	19.47	T	T	T	T
UniversalMod	ZZUN3029	ROUND TUBE SLIDE SUPPORT LEG4ft	$ 305	18.15	T	T	T	T
UniversalMod	ZZUN3029S	ROUND TUBE SLIDE SUPPORT LEG4ft (SURFACE MOUNT)	$ 305	17.05	T	T	T	T
UniversalMod	ZZUN3036	ROUND TUBE SLIDE SUPPORT LEG3ft	$ 305	15.40	T	T	T	T
UniversalMod	ZZUN3036S	ROUND TUBE SLIDE SUPPORT LEG3ft (SURFACE MOUNT)	$ 305	14.63	T	T	T	T
UniversalMod	ZZUN3037	ROUND TUBE SLIDE SUPPORT LEG2ft	$ 305	15.40	F	F	F	F
UniversalMod	ZZUN3037S	ROUND TUBE SLIDE SUPPORT LEG2ft (SURFACE MOUNT)	$ 305	14.74	F	F	F	F
UniversalMod	ZZUN3038	30in ROUND STRAIGHT TUBESECTION W/ WINDOW	$ 2,450	32.33	T	T	T	T
UniversalMod	ZZUN3039	TEMPORARY BARRIER (EX/CH/PM)	$ 2,096	87.48	T	T	T	F
UniversalMod	ZZUN3207	SLITHER SLIDE 2.0 (STRAIGHTSECTION)	$ 622	19.59	T	T	T	T
UniversalMod	ZZUN3208	SLITHER SLIDE 2.0(RIGHT SECTION)	$ 622	19.59	T	T	T	T
UniversalMod	ZZUN3209	SLITHER SLIDE 2.0(LEFT SECTION)	$ 622	19.59	T	T	T	T
UniversalMod	ZZUN3217	SLITHER SLIDE 2.0 (RIGHT 120°SECTION)	$ 1,022	41.68	T	T	T	T
UniversalMod	ZZUN3218	SLITHER SLIDE 2.0 (LEFT 120°SECTION)	$ 1,022	41.68	T	T	T	T
UniversalMod	ZZUN3219	SLITHER SLIDE ROLLER SECTION	$ 1,750	33.80	T	T	T	T
UniversalMod	ZZUN3246	SLITHER SLIDE 2.0 SUPPORT LEG6ft-6in	$ 279	21.61	T	T	T	T
UniversalMod	ZZUN3246S	SLITHER SLIDE 2.0 SUPPORT LEG6ft-6in (SURFACE MOUNT)	$ 320	30.17	T	T	T	T
UniversalMod	ZZUN3247	SLITHER SLIDE 2.0 SUPPORT LEG5ft-6in	$ 279	19.41	T	T	T	T
UniversalMod	ZZUN3247S	SLITHER SLIDE 2.0 SUPPORT LEG5ft-6in (SURFACE MOUNT)	$ 279	26.51	T	T	T	T
UniversalMod	ZZUN3248	SLITHER SLIDE 2.0 SUPPORT LEG4ft-6in	$ 279	17.21	T	T	T	T
UniversalMod	ZZUN3248S	SLITHER SLIDE 2.0 SUPPORT LEG4ft-6in (SURFACE MOUNT)	$ 279	24.31	T	T	T	T
UniversalMod	ZZUN3249	SLITHER SLIDE 2.0 SUPPORT LEG3ft-6in	$ 279	15.01	T	T	T	T

UniversalMod	ZZUN3249S	SLITHER SLIDE 2.0 SUPPORT LEG3ft-6in (SURFACE MOUNT)	$ 279	22.11	T	T	T	T
UniversalMod	ZZUN3256	SLITHER SLIDE 2.0 SUPPORT LEG2ft-6in	$ 279	12.81	T	T	T	T
UniversalMod	ZZUN3256S	SLITHER SLIDE 2.0 SUPPORT LEG2ft-6in (SURFACE MOUNT)	$ 279	19.91	T	T	T	T
Boulders	ZZUN3257	ORIGINS HILL SLIDE ANCHOR LEG (1ft)	$ 269	10.32	T	T	T	T
Boulders	ZZUN3257S	ORIGINS HILL SLIDE ANCHOR LEG (1ft) SURF MOUNT	$ 269	16.42	T	T	T	T
UniversalMod	ZZUN3474	CTR POST & SUPPORT ARMS FOR 15FT & 14FT SPIRAL TUBE SLIDE	$ 3,979	220.4	T	T	T	T
UniversalMod	ZZUN3474S	CTR POST & SUPPORT ARMS FOR 15FT & 14FT SPIRAL TUBE SLIDE (SM)	$ 3,979	212.3	T	T	T	T
UniversalMod	ZZUN3475	CTR POST & SUPPORT ARMS FOR 9FT SPIRAL TUBE SLIDE	$ 2,268	116.5	T	T	T	T
UniversalMod	ZZUN3475S	CTR POST & SUPPORT ARMS FOR 9FT SPIRAL TUBE SLIDE (SM)	$ 2,268	108.3	T	T	T	T
ThemedPlay	ZZUN4279	TELESCOPE PIPE WALL MOUNT(CH/EX)	$ 444	12.23	T	T	T	T
ThemedPlay	ZZUN4280	TELESCOPE (PIPE WALL MOUNTFOR 4in RUNG CENTERS)	$ 444	12.33	T	T	T	T
ThemedPlay	ZZUN4299	STEERING WHEEL (CH/EX PIPEWALL MOUNT FOR 4in CENTERS)	$ 225	5.29	T	T	T	T
ThemedPlay	ZZUN4300	STEERING WHEEL (PIPE WALLMOUNT)	$ 225	5.39	T	T	T	T
ThemedPlay	ZZUN4307	STEERING WHEEL (CH/EX PIPEWALL MOUNT FOR 3-3/4 CENTERS)	$ 325	5.25	T	T	T	T
ThemedPlay	ZZUN4340	STEERING WHEEL (OVAL PANELMOUNT)	$ 218	4.98	T	T	T	T
ThemedPlay	ZZUN4348	CITYSCAPES STEERING WHEEL	$ 345	17.30	T	T	T	F
UniversalMod	ZZUN4438	TELESCOPE - PIPE WALL MOUNTWITH LENS (CH/EX)	$ 1,200	13.23	T	T	T	T
UniversalMod	ZZUN4439	TELESCOPE - PIPE WALL MOUNT WITH LENS (PM)	$ 1,200	13.33	T	T	T	T
UniversalMod	ZZUN4449	PLAYWOOD TELESCOPE	$ 470	11.81	T	T	T	T
UniversalMod	ZZUN4673	A-MAZE-ING INSERT	$ 992	14.51	T	T	T	T
UniversalMod	ZZUN4674	HYPNOTIZE INSERT	$ 1,124	14.95	T	T	T	T
UniversalMod	ZZUN4675	FUNHOUSE INSERT	$ 1,157	18.83	T	T	T	T
UniversalMod	ZZUN4676	FOUR-THE-WIN INSERT	$ 1,244	15.08	T	T	T	T
UniversalMod	ZZUN4677	VERY BURIED INSERT	$ 1,829	17.97	T	T	T	T
UniversalMod	ZZUN4678	SLIDE & SOLVE INSERT	$ 1,448	17.61	T	T	T	T
UniversalMod	ZZUN4679	MAGICAL MUSIC INSERT	$ 2,422	23.11	T	T	T	T
UniversalMod	ZZUN4711	KINETIC FLAG INSERT (COLOR POLYCARB)	$ 395	2.4	T	T	T	T
UniversalMod	ZZUN4712	KINETIC FLAG INSERT (SINGLE SIDED GRAPHIC)	$ 803	2.4	T	T	T	T
UniversalMod	ZZUN4713	KINETIC FLAG INSERT (DOUBLE SIDED GRAPHIC)	$ 1,011	2.4	T	T	T	T
UniversalMod	ZZUN4786	RAINBOW INSERT	$ 982	21.66	T	T	T	T
UniversalMod	ZZUN4787	TACTILE INSERT	$ 738	19.24	T	T	T	T
UniversalMod	ZZUN4789	COUNTING INSERT	$ 1,397	19.77	T	T	T	T
UniversalMod	ZZUN4792	CATACOMBS PANEL INSERT	$ 956	23.02	T	T	T	T
UniversalMod	ZZUN4793	CONSTRUCTION PANEL INSERT	$ 1,768	27.44	T	T	T	T
UniversalMod	ZZUN4795	GEAR PANEL INSERT	$ 1,430	22.69	T	T	T	T
UniversalMod	ZZUN4796	OVAL BUBBLE PANEL INSERT	$ 375	5.87	T	T	T	T
UniversalMod	ZZUN4798	BALL MAZE PANEL INSERT	$ 808	20.48	T	T	T	T
UniversalMod	ZZUN4806	SHIFTING SANDS PANEL INSERT	$ 1,153	22.97	T	T	T	T
UniversalMod	ZZUN4818	MOVE IT INSERT	$ 1,328	30.39	T	T	T	T
UniversalMod	ZZUN4826	NUVO RAINBOW INSERT	$ 982	22.05	T	T	T	T
UniversalMod	ZZUN4827	NUVO TACTILE INSERT	$ 738	19.63	T	T	T	T
UniversalMod	ZZUN4828	NUVO COUNTING INSERT	$ 1,397	20.17	T	T	T	T
UniversalMod	ZZUN4829	NUVO MOVE IT INSERT	$ 1,343	30.79	T	T	T	T
UniversalMod	ZZUN4857	NUVO - CONSTRUCTION PANELINSERT	$ 1,768	30.80	T	F	T	T
UniversalMod	ZZUN4858	NUVO - CATACOMBS PANELINSERT	$ 956	24.02	T	T	T	T
UniversalMod	ZZUN4859	NUVO - ROCKER PANEL INSERT	$ 982	24.55	T	T	T	T
UniversalMod	ZZUN4868	NUVO - GEAR PANEL INSERT	$ 1,430	24.14	T	T	T	T
UniversalMod	ZZUN4869	NUVO - BALL MAZE PANEL INSERT	$ 808	21.69	T	T	T	T
UniversalMod	ZZUN4876	NUVO - PACHINKO PANEL INSERT	$ 869	23.30	T	T	T	T
UniversalMod	ZZUN4877	NUVO - SHIFTING SANDS PANELINSERT	$ 1,153	24.18	T	T	T	T
UniversalMod	ZZUN4879	NUVO- PERF PANEL INSERT	$ 251	2.90	T	T	T	T
ThemedPlay	ZZUN5049	DRUM KIT (20in HEIGHT)	$ 2,092	121.18	T	T	T	T
ThemedPlay	ZZUN5049S	DRUM KIT (20in HEIGHT) (SM)	$ 2,092	107.38	T	T	T	T
UniversalMod	ZZUN5197	NATURE FREESTANDING 6' LOG CRAWL TUBE	$ 3,479	136.91	T	T	T	T
UniversalMod	ZZUN5197S	NATURE FREESTANDING 6' LOG CRAWL TUBE (SURF MOUNT)	$ 3,479	146.51	T	T	T	T
UniversalMod	ZZUN5211	NATURE PANELS	$ 1,157	56.6	T	T	T	T
UniversalMod	ZZUN5211S	NATURE PANELS (SM)	$ 1,157	67.7	T	T	T	T
UniversalMod	ZZUN5212	GEOMETRIC PANELS	$ 1,055	49.9	T	T	T	T
UniversalMod	ZZUN5212S	GEOMETRIC PANELS (SM)	$ 1,055	61.1	T	T	T	T
UniversalMod	ZZUN5213	STRAIGHT ADVENTURE TUBE	$ 1,196	55.4	T	T	T	T
UniversalMod	ZZUN5214	LOW CLIMB	$ 3,610	222.6	T	T	T	T
UniversalMod	ZZUN5214S	LOW CLIMB (SM)	$ 3,610	228.1	T	T	T	T
UniversalMod	ZZUN5215	HIGH CLIMB	$ 6,628	375.8	T	T	T	T
UniversalMod	ZZUN5215S	HIGH CLIMB (SM)	$ 6,628	362	T	T	T	T
UniversalMod	ZZUN5216	HORIZONTAL S & 90 DEGREE ADVENTURE TUBE 2.0	$ 1,834	92.8	T	T	T	T
UniversalMod	ZZUN5750	PARALLEL BARS	$ 2,409	103.03	T	T	T	T
UniversalMod	ZZUN5898	BRANCH OUT PM/CH CONVERSION PLATFORM	$ 1,365	59.45	T	T	T	T
UniversalMod	ZZUN5903	BRANCH OUT ANCHOR	$ 12,198	660.68	T	T	T	T
UniversalMod	ZZUN5904	BRANCH OUT PEDESTAL	$ 14,501	929.87	T	T	T	T
UniversalMod	ZZUN5905	BRANCH OUT GATEWAY	$ 20,678	1259.43	T	T	T	T
UniversalMod	ZZUN5909	GATEWAY (FREE-STANDING)	$ 18,815	1232.06	T	T	T	T
UniversalMod	ZZUN5909S	GATEWAY (FREE-STANDING SM)	$ 18,815	1107.67	T	T	T	T
UniversalMod	ZZUN5911	BRANCHOUT GATEWAY W/ SLIDE-A-SIDE	$ 20,726	1308.2	T	T	T	T
UniversalMod	ZZUN5912	FREE-STD GATEWAY W/ SLIDE-A-SIDE	$ 19,520	1278.5	T	T	T	T
UniversalMod	ZZUN5912S	FREE-STD GATEWAY W/ SLIDE-A-SIDE (SM)	$ 19,520	1142.8	T	T	T	T
UniversalMod	ZZUN6070	BRANCH OUT TRUNK W/ SHADE CANOPY	$ 41,044	1951.7	T	T	T	T
UniversalMod	ZZUN6071	BRANCH OUT TRUNK W/ PERF METAL CANOPY	$ 45,700	2427.25	T	T	T	T
UniversalMod	ZZUN6072	BRANCH OUT BELT CONNECTOR	$ 3,752	142.47	T	T	T	T
UniversalMod	ZZUN6073	BRANCH OUT ROPE BRIDGE CONNECTOR	$ 8,572	231.45	T	T	T	T
UniversalMod	ZZUN6074	BRANCH OUT TWISTED NET CONNECTOR	$ 4,302	134.1	T	T	T	T
UniversalMod	ZZUN6087	BELL PUZZLE INSERT	$ 450	15.3	T	T	T	F

UniversalMod	ZZUN6088	COLOR REEL INSERT - SINGLE SIDED	$ 990	26.3	T	T	T	T
UniversalMod	ZZUN6091	COLOR REEL INSERT - DOUBLE SIDED	$ 1,150	27.7	T	T	T	T
UniversalMod	ZZUN6140	18in KICK PLATE INFILL	$ 218	18.99	T	T	T	T
UniversalMod	ZZUN6150	24in KICK PLATE INFILL	$ 257	25.29	T	T	T	T
UniversalMod	ZZUN6160	30in KICK PLATE INFILL	$ 273	30.99	T	T	T	T
UniversalMod	ZZUN6170	36in KICK PLATE INFILL	$ 283	37.29	T	T	T	T
UniversalMod	ZZUN6266	INFINET PORTAL	$ 5,586	475.89	T	T	T	T
UniversalMod	ZZUN6267	INFINET POST W/ CAP FOR 24IN NET	$ 1,758	101.74	T	T	T	T
UniversalMod	ZZUN6267S	INFINET POST W/ CAP FOR 24IN NET (SM)	$ 1,758	80.67	T	T	T	T
UniversalMod	ZZUN6268	INFINET DBL CONNECTION POST W/ CAP FOR 24IN-36IN NETS	$ 2,402	132.24	T	T	T	T
UniversalMod	ZZUN6268S	INFINET DBL CONNECTION POST W/ CAP FOR 24IN-36IN NETS (SM)	$ 2,402	111.15	T	T	T	T
UniversalMod	ZZUN6269	INFINET POST W/ CAP FOR 36IN NET	$ 2,195	118.03	T	T	T	T
UniversalMod	ZZUN6269S	INFINET POST W/ CAP FOR 36IN NET (SM)	$ 2,195	96.96	T	T	T	T
UniversalMod	ZZUN6270	INFINET POST FOR 36IN PORTAL	$ 2,118	126.1	T	T	T	T
UniversalMod	ZZUN6270S	INFINET POST FOR 36IN PORTAL (SM)	$ 2,118	105.05	T	T	T	T
UniversalMod	ZZUN6276	INFINET DBL CONNECTION POST W/ CAP FOR 36IN-48IN NETS	$ 2,747	144.56	T	T	T	T
UniversalMod	ZZUN6276S	INFINET DBL CONNECTION POST W/ CAP FOR 36IN-48IN NETS (SM)	$ 2,747	123.48	T	T	T	T
UniversalMod	ZZUN6277	INFINET POST W/ CAP FOR 48IN NET	$ 2,205	130.35	T	T	T	T
UniversalMod	ZZUN6277S	INFINET POST W/ CAP FOR 48IN NET (SM)	$ 2,205	109.28	T	T	T	T
UniversalMod	ZZUN6278	INFINET POST FOR 48IN PORTAL	$ 2,322	138.42	T	T	T	T
UniversalMod	ZZUN6278S	INFINET POST FOR 48IN PORTAL (SM)	$ 2,322	117.37	T	T	T	T
UniversalMod	ZZUN6279	INFINET DBL CONNECTION POST W/ CAP FOR 48IN-60IN NETS	$ 2,747	156.88	T	T	T	T
UniversalMod	ZZUN6279S	INFINET DBL CONNECTION POST W/ CAP FOR 48IN-60IN NETS (SM)	$ 2,747	135.8	T	T	T	T
UniversalMod	ZZUN6280	INFINET POST W/ CAP FOR 60IN NET	$ 2,649	148.44	T	T	T	T
UniversalMod	ZZUN6280S	INFINET POST W/ CAP FOR 60IN NET (SM)	$ 2,649	127.37	T	T	T	T
UniversalMod	ZZUN6286	INFINET POST FOR 60IN PORTAL	$ 2,540	156.51	T	T	T	T
UniversalMod	ZZUN6286S	INFINET POST FOR 60IN PORTAL (SM)	$ 2,540	135.45	T	T	T	T
UniversalMod	ZZUN6287	INFINET DBL CONNECTION POST W/ CAP FOR 60IN-72IN NETS	$ 2,846	169.2	T	T	T	T
UniversalMod	ZZUN6287S	INFINET DBL CONNECTION POST W/ CAP FOR 60IN-72IN NETS (SM)	$ 2,846	148.13	T	T	T	T
UniversalMod	ZZUN6288	INFINET POST W/ CAP FOR 72IN NET	$ 2,467	154.99	T	T	T	T
UniversalMod	ZZUN6288S	INFINET POST W/ CAP FOR 72IN NET (SM)	$ 2,467	133.92	T	T	T	T
UniversalMod	ZZUN6289	INFINET POST FOR 72IN PORTAL	$ 2,577	163.06	T	T	T	T
UniversalMod	ZZUN6289S	INFINET POST FOR 72IN PORTAL (SM)	$ 2,577	142	T	T	T	T
UniversalMod	ZZUN6290	INFINET DBL CONNECTION POST W/ CAP FOR 72IN-84IN NETS	$ 2,987	181.52	T	T	T	T
UniversalMod	ZZUN6290S	INFINET DBL CONNECTION POST W/ CAP FOR 72IN-84IN NETS (SM)	$ 2,987	160.45	T	T	T	T
UniversalMod	ZZUN6296	INFINET POST W/ CAP FOR 84IN NET	$ 2,944	173.08	T	T	T	T
UniversalMod	ZZUN6296S	INFINET POST W/ CAP FOR 84IN NET (SM)	$ 2,944	152.02	T	T	T	T
UniversalMod	ZZUN6297	INFINET POST FOR 84IN PORTAL	$ 2,759	181.15	T	T	T	T
UniversalMod	ZZUN6297S	INFINET POST FOR 84IN PORTAL	$ 2,759	160.1	T	T	T	T
UniversalMod	ZZUN6298	INFINET DBL CONNECTION POST W/ CAP FOR 84IN-96IN NETS	$ 3,140	193.85	T	T	T	T
UniversalMod	ZZUN6298S	INFINET DBL CONNECTION POST W/ CAP FOR 84IN-96IN NETS (SM)	$ 3,140	172.77	T	T	T	T
UniversalMod	ZZUN6299	INFINET POST W/ CAP FOR 96IN NET	$ 2,916	179.62	T	T	T	T
UniversalMod	ZZUN6299S	INFINET POST W/ CAP FOR 96IN NET (SM)	$ 2,916	158.56	T	T	T	T
UniversalMod	ZZUN6300	INFINET POST FOR 96IN PORTAL	$ 2,737	187.7	T	T	T	T
UniversalMod	ZZUN6300S	INFINET POST FOR 96IN PORTAL (SM)	$ 2,737	166.64	T	T	T	T
UniversalMod	ZZUN6306	INFINET ROPE BRIDGE W/ 2 POSTS	$ 10,381	589.96	T	T	T	T
UniversalMod	ZZUN6306S	INFINET ROPE BRIDGE W/ 2 POSTS (SM)	$ 10,381	547.82	T	T	T	T
UniversalMod	ZZUN6307	INFINET SMALL NET	$ 7,312	236.53	T	T	T	T
UniversalMod	ZZUN6308	INFINET SMALL NET W/ TRANSFER AREA	$ 7,224	292.58	T	T	T	T
UniversalMod	ZZUN6309	INFINET MEDIUM NET	$ 9,511	302.18	T	T	T	T
UniversalMod	ZZUN6310	INFINET LARGE NET	$ 20,868	522.37	T	T	T	T
UniversalMod	ZZUN6316	INFINET TALK TUBE (NET POST TO NET POST)	$ 1,397	40.62	T	T	T	T
UniversalMod	ZZUN6327	TELESCOPE ASSEMBLY	$ 251	5.15	T	T	T	T
UniversalMod	ZZUN6328	INFINET SENSORY CUE - DIMPLES	$ 225	2.87	T	T	T	T
UniversalMod	ZZUN6329	INFINET SENSORY CUE - WASHBOARD	$ 225	2.86	T	T	T	T
UniversalMod	ZZUN6330	INFINET SENSORY CUE - CUSTOM	$ 225	2.98	T	T	T	T
UniversalMod	ZZUN6336	INFINET SENSORY CUE - PANDA	$ 225	2.98	T	T	T	T
UniversalMod	ZZUN6337	INFINET SENSORY CUE - OWL	$ 225	2.98	T	T	T	T
UniversalMod	ZZUN6338	INFINET SENSORY CUE - POLAR BEAR	$ 225	2.98	T	T	T	T
UniversalMod	ZZUN6339	INFINET SENSORY CUE - NEST	$ 225	2.98	T	T	T	T
UniversalMod	ZZUN6340	INFINET SENSORY CUE - MOUNTAIN LION	$ 225	2.98	T	T	T	T
UniversalMod	ZZUN6346	INFINET SENSORY CUE - FROG	$ 225	2.98	T	T	T	T
UniversalMod	ZZUN6347	INFINET SENSORY CUE - RACCOON	$ 225	2.98	T	T	T	T
UniversalMod	ZZUN6348	INFINET SENSORY CUE - MIRROR	$ 225	2.9	T	T	T	T
UniversalMod	ZZUN6349	INFINET SENSORY CUE - BUBBLES	$ 225	2.87	T	T	T	T
UniversalMod	ZZUN6350	INFINET SENSORY CUE - RAIN	$ 225	3.09	T	T	T	T
UniversalMod	ZZUN6356	INFINET SENSORY CUE - WAVES	$ 225	2.98	T	T	T	T
UniversalMod	ZZUN6357	INFINET SENSORY CUE - ICE	$ 225	3.09	T	T	T	T
UniversalMod	ZZUN6358	INFINET SENSORY CUE - GRASS	$ 225	2.98	T	T	T	T
SkillOther	ZZUN6500	DURA BALANCE BEAM	$ 684	58.51	T	T	T	T
UniversalMod	ZZUN6586	SHORTER ADVENTURE BRIDGE REPLACEMENT CHAIN	$ 126	1.81	T	T	T	T
UniversalMod	ZZUN6729	CONTAINMENT LEVEL FILLER BRACKET	$ 160	12.1	F	F	F	F
UniversalMod	ZZUN6733	KICKPLATES FOR CENTRAL TOWER 14FT	$ 1,190	157.7	T	T	T	T
UniversalMod	ZZUN6734	KICKPLATES FOR CENTRAL TOWER 9FT	$ 738	94.6	T	T	T	T
UniversalMod	ZZUN6736	WHIRLWIND CLIMBER 24in	$ 1,994	113.64	T	T	T	T
UniversalMod	ZZUN6736S	WHIRLWIND CLIMBER 24inSURFACE MOUNT	$ 1,994	98.59	T	T	T	T
UniversalMod	ZZUN6737	WHIRLWIND CLIMBER 36in	$ 2,441	132.75	T	T	T	T
UniversalMod	ZZUN6737S	WHIRLWIND CLIMBER 36inSURFACE MOUNT	$ 2,441	117.57	T	T	T	T
UniversalMod	ZZUN6738	WHIRLWIND CLIMBER 48in	$ 2,890	151.75	T	T	T	T
UniversalMod	ZZUN6738S	WHIRLWIND CLIMBER 48inSURFACE MOUNT	$ 2,890	136.70	T	T	T	T
UniversalMod	ZZUN6739	WHIRLWIND CLIMBER 60in	$ 3,348	170.79	T	T	T	T

UniversalMod	ZZUN6739S	WHIRLWIND CLIMBER 60inSURFACE MOUNT	$ 3,348	155.75	T	T	T	T
UniversalMod	ZZUN6740	WHIRLWIND CLIMBER 72in	$ 4,025	189.86	T	T	T	T
UniversalMod	ZZUN6740S	WHIRLWIND CLIMBER 72inSURFACE MOUNT	$ 4,025	174.81	T	T	T	T
UniversalMod	ZZUN6791	LEAF SWIRL	$ 1,271	22.2	T	T	T	T
UniversalMod	ZZUN6840	MODPODS QUAD - VERTICAL	$ 4,200	324.09	T	T	T	T
UniversalMod	ZZUN6840S	MODPODS QUAD - VERTICAL (SM)	$ 4,200	303.43	T	T	T	T
UniversalMod	ZZUN6841	MODPODS TRI - VERTICAL TALL	$ 4,248	281.15	T	T	T	T
UniversalMod	ZZUN6841S	MODPODS TRI - VERTICAL TALL (SM)	$ 4,248	260.44	T	T	T	T
UniversalMod	ZZUN6842	MODPODS TRI - VERTICAL SHORT	$ 4,290	272.54	T	T	T	T
UniversalMod	ZZUN6842S	MODPODS TRI - VERTICAL SHORT (SM)	$ 4,290	251.86	T	T	T	T
UniversalMod	ZZUN6843	MODPODS TRI - VERTICAL SHORT W/O OUTRIGGER	$ 3,708	233.59	T	T	T	T
UniversalMod	ZZUN6843S	MODPODS TRI - VERTICAL SHORT W/O OUTRIGGER (SM)	$ 3,708	219.81	T	T	T	T
UniversalMod	ZZUN6844	MODPODS QUAD - TABLETOP 4FT (2-5)	$ 3,865	323.16	T	T	T	T
UniversalMod	ZZUN6844S	MODPODS QUAD - TABLETOP 4FT (2-5) (SM)	$ 3,865	295.58	T	T	T	T
UniversalMod	ZZUN6845	MODPODS QUAD - TABLETOP 6FT	$ 4,018	340.55	T	T	T	T
UniversalMod	ZZUN6845S	MODPODS QUAD - TABLETOP 6FT (SM)	$ 4,018	313.04	T	T	T	T
UniversalMod	ZZUN6846	MODPODS TRI - TABLETOP 6FT	$ 3,883	270.49	T	T	T	T
UniversalMod	ZZUN6846S	MODPODS TRI - TABLETOP 6FT (SM)	$ 3,883	249.79	T	T	T	T
UniversalMod	ZZUN6847	MODPODS TRI - TABLETOP 4FT (2-5)	$ 4,010	257.9	T	T	T	T
UniversalMod	ZZUN6847S	MODPODS TRI - TABLETOP 4FT (2-5) (SM)	$ 4,010	237.2	T	T	T	T
UniversalMod	ZZUN6848	MODPODS TRI - TABLETOP 4FT	$ 4,010	261.26	T	T	T	T
UniversalMod	ZZUN6848S	MODPODS TRI - TABLETOP 4FT (SM)	$ 4,010	240.57	T	T	T	T
UniversalMod	ZZUN6849	MODPODS QUAD - TABLETOP 4FT	$ 4,008	334.45	T	T	T	T
UniversalMod	ZZUN6849S	MODPODS QUAD - TABLETOP 4FT (SM)	$ 4,008	306.86	T	T	T	T
UniversalMod	ZZUN6852	MODPODS CONNECTOR - STRAIGHT	$ 181	10.21	T	T	T	T
UniversalMod	ZZUN6853	MODPODS CONNECTOR - QUAD TO TRI RIGHT	$ 214	12.01	T	T	T	T
UniversalMod	ZZUN6854	MODPODS CONNECTOR - 90 DEGREE	$ 225	13.23	T	T	T	T
UniversalMod	ZZUN6855	MODPODS CONNECTOR - QUAD TO TRI LEFT	$ 214	12.01	T	T	T	T
UniversalMod	ZZUN6861	ANYWHERE SEAT	$ 694	27.67	T	T	T	T
UniversalMod	ZZUN6990	MONORAIL SECTION FORCANTILEVER POSTS	$ 3,446	56.38	T	T	T	F
UniversalMod	ZZUN7000	MONORAIL EXTENSION FORCANTILEVER POSTS	$ 1,671	40.21	T	T	T	F
UniversalMod	ZZUN7010	TIRE STEPS ASSEMBLY FOR OVERHEAD EVENTS	$ 815	54.41	T	T	T	T
UniversalMod	ZZUN7026	DROP ZONE (48in DECK)	$ 7,786	164.57	T	T	T	T
UniversalMod	ZZUN7027	DROP ZONE (72in DECK)	$ 9,293	216.32	T	T	T	T
SkillOther	ZZUN7090	BOUNCE BUTTON	$ 890	31.84	T	T	T	T
SkillOther	ZZUN7096	LOOPY WHOOP	$ 3,634	99.15	T	T	T	T
Independent	ZZUN7097	CLIMBING SQUARES - CLUSTER 1	$ 432	15.43	T	T	T	T
Independent	ZZUN7097S	CLIMBING SQUARES - CLUSTER 1 (SM)	$ 432	11.21	T	T	T	T
Independent	ZZUN7098	CLIMBING SQUARES - CLUSTER 2	$ 939	40.08	T	T	T	T
Independent	ZZUN7098S	CLIMBING SQUARES - CLUSTER 2 (SM)	$ 939	34.78	T	T	T	T
Independent	ZZUN7099	CLIMBING SQUARES - CLUSTER 3	$ 732	30.68	T	T	T	T
Independent	ZZUN7099S	CLIMBING SQUARES - CLUSTER 3 (SM)	$ 732	25.37	T	T	T	T
SkillOther	ZZUN7100	SIDEWALK	$ 3,625	166.13	T	T	T	T
SkillOther	ZZUN7100S	SIDEWALK (SURFACE MOUNT)	$ 3,625	138.85	T	T	T	F
Independent	ZZUN7106	CLIMBING SQUARES - CLUSTER 4	$ 1,764	76.65	T	T	T	T
Independent	ZZUN7106S	CLIMBING SQUARES - CLUSTER 4 (SM)	$ 1,764	67.17	T	T	T	T
Independent	ZZUN7107	CLIMBING SQUARES - CLUSTER 5	$ 2,479	110.25	T	T	T	T
Independent	ZZUN7107S	CLIMBING SQUARES - CLUSTER 5 (SM)	$ 2,479	99.65	T	T	T	T
Independent	ZZUN7108	CLIMBING SQUARES - CLUSTER 6	$ 3,555	157.05	T	T	T	T
Independent	ZZUN7108S	CLIMBING SQUARES - CLUSTER 6 (SM)	$ 3,555	142.23	T	T	T	T
Independent	ZZUN7109	CLIMBING SQUARES - CLUSTER 7	$ 5,066	221.42	T	T	T	T
Independent	ZZUN7109S	CLIMBING SQUARES - CLUSTER 7 (SM)	$ 5,066	198.65	T	T	T	T
Independent	ZZUN7116	CLIMBING SQUARES - CLUSTER 8	$ 4,139	181.44	T	T	T	T
Independent	ZZUN7116S	CLIMBING SQUARES - CLUSTER 8 (SM)	$ 4,139	162.40	T	T	T	T
Independent	ZZUN7117	CLIMBING SQUARES - CLUSTER 9	$ 5,896	269.09	T	T	T	T
Independent	ZZUN7117S	CLIMBING SQUARES - CLUSTER 9 (SM)	$ 5,896	238.38	T	T	T	T
Independent	ZZUN7118	CLIMBING SQUARES- CORNER TO CORNER	$ 50	0.5	T	T	T	T
Independent	ZZUN7119	CLIMBING SQUARES- PLANE TO PLANE	$ 61	1.1	T	T	T	T
Independent	ZZUN7126	CLIMBING SQUARES- OVERHANGING BLOCK	$ 61	1.64	T	T	T	T
UniversalMod	ZZUN7136	UNITY STEPPER - SMALL	$ 1,100	29.97	T	T	T	T
UniversalMod	ZZUN7136S	UNITY STEPPER - SMALL (SM)	$ 1,100	24.00	T	T	T	T
UniversalMod	ZZUN7137	UNITY STEPPER - MEDIUM	$ 1,600	54.71	T	T	T	T
UniversalMod	ZZUN7137S	UNITY STEPPER - MEDIUM (SM)	$ 1,600	48.74	T	T	T	T
UniversalMod	ZZUN7138	UNITY STEPPER - LARGE	$ 2,300	128.05	T	T	T	T
UniversalMod	ZZUN7138S	UNITY STEPPER - LARGE (SM)	$ 2,300	105.43	T	T	T	T
SkillOther	ZZUN7140	STATIONARY BUTTONS (12in)	$ 575	27.12	T	T	T	T
SkillOther	ZZUN7140S	STATIONARY BUTTONS (12in)(SURFACE MOUNT)	$ 575	29.71	T	T	T	T
SkillOther	ZZUN7146	STATIONARY BUTTONS (18in)	$ 579	27.92	T	T	T	T
SkillOther	ZZUN7146S	STATIONARY BUTTONS (18in)(SURFACE MOUNT)	$ 579	30.92	T	T	T	T
SkillOther	ZZUN7147	STATIONARY BUTTONS (24in)	$ 650	29.22	T	T	T	T
SkillOther	ZZUN7147S	STATIONARY BUTTONS (24in)(SURFACE MOUNT)	$ 650	32.12	T	T	T	T
UniversalMod	ZZUN7330	AEROGLIDER DECK EXTENSION FOR EXISTING STRUCTURE	$ 666	57.12	T	T	T	T
UniversalMod	ZZUN7330S	AEROGLIDER DECK EXTENSION FOR EXISTING STRUCTURE (SURF MNT)	$ 666	57.12	T	T	T	T
UniversalMod	ZZUN7336	AEROGLIDER	$ 27,224	1535.79	T	T	T	F
UniversalMod	ZZUN7337	AEROGLIDER CUSTOM SIGN	$ 1,109	18.95	T	T	T	T
UniversalMod	ZZUN7339	AEROGLIDER 2in SURFACE MOUNT EXTENSION KIT	$ 524	22.00	T	T	T	T
UniversalMod	ZZUN7368	OVERLAPPING BERM CONNECTOR	$ 2,056	32.4	T	T	T	T
UniversalMod	ZZUN7369	RAMP TO BERM CONNECTOR	$ 240	14.87	T	T	T	F
UniversalMod	ZZUN7896	BRANCH OUT HAMMOCK	$ 6,952	122.56	T	T	T	T
UniversalMod	ZZUN7897	BRANCH OUT CARGO NET	$ 7,727	143.08	T	T	T	T
UniversalMod	ZZUN7898	BRANCH OUT ZIG-ZAG	$ 5,205	112.97	T	T	T	T

RockBlocks	ZZUN8236	ROCKBLOCKS END WALL (84in)	$ 2,802	103.89	T	T	T	T
RockBlocks	ZZUN8236S	ROCKBLOCKS END WALL (84in)(SURF MOUNT)	$ 2,802	88.86	T	T	T	T
RockBlocks	ZZUN8237	ROCKBLOCKS ARCH W/ DECK	$ 5,193	201.50	T	T	T	T
RockBlocks	ZZUN8238	ROCKBLOCKS ZIGZAG SLIDE	$ 2,828	139.30	T	T	T	T
RockBlocks	ZZUN8238S	ROCKBLOCKS ZIGZAG SLIDE(SURF MOUNT)	$ 2,828	145.35	T	T	T	T
RockBlocks	ZZUN8239	ROCKBLOCKS HOOPS CLIMBER	$ 1,583	46.47	T	T	T	T
RockBlocks	ZZUN8239S	ROCKBLOCKS HOOPS CLIMBER(SURF MOUNT)	$ 1,583	48.67	T	T	T	T
RockBlocks	ZZUN8240	ROCKBLOCKS DIAGONAL CLIMBER	$ 1,583	46.45	T	T	T	T
RockBlocks	ZZUN8240S	ROCKBLOCKS DIAGONAL CLIMBER(SURF MOUNT)	$ 1,583	48.65	T	T	T	T
RockBlocks	ZZUN8246	ROCKBLOCKS STALAGMITE CLIMBER	$ 3,523	144.00	T	T	T	T
RockBlocks	ZZUN8246S	ROCKBLOCKS STALAGMITE CLIMBER (SURF MOUNT)	$ 3,523	115.60	T	T	T	T
RockBlocks	ZZUN8350	ROCKBLOCKS TRI LADDER(60in WALL)	$ 1,802	105.83	T	T	T	T
RockBlocks	ZZUN8350S	ROCKBLOCKS TRI LADDER(60in WALL) (SURFACE MOUNT)	$ 1,802	102.83	T	T	T	T
RockBlocks	ZZUN8356	ROCKBLOCKS TRI LADDER(84in WALL)	$ 2,344	132.55	T	T	T	T
RockBlocks	ZZUN8356S	ROCKBLOCKS TRI LADDER(84in WALL) (SURFACE MOUNT)	$ 2,344	129.55	T	T	T	T
RockBlocks	ZZUN8357	ROCKBLOCKS KINKED WALL(84in)	$ 3,380	107.07	T	T	T	T
RockBlocks	ZZUN8358	ROCKBLOCKS 90 DEGREE WALL(84in to 60in)	$ 3,698	119.07	T	T	T	T
RockBlocks	ZZUN8359	ROCKBLOCKS 90 DEGREE WALL(60in)	$ 2,577	82.72	T	T	T	T
RockBlocks	ZZUN8360	ROCKBLOCKS END WALL (60in)	$ 1,955	76.13	T	T	T	T
RockBlocks	ZZUN8360S	ROCKBLOCKS END WALL (60in)(SURFACE MOUNT)	$ 1,955	73.83	T	T	T	T
RockBlocks	ZZUN8366	SAMPLE WALL SECTION	$ 1,961	26.51	T	T	T	T
RockBlocks	ZZUN8370	ROCKBLOCKS 90 DEGREE WALL(84in TO 60in) RIGHT	$ 3,698	108.96	T	T	T	T
RockBlocks	ZZUN8376	ROCKBLOCKS LADDER(60in TO 84in WALL)	$ 1,103	76.36	T	T	T	T
RockBlocks	ZZUN8376S	ROCKBLOCKS LADDER(61in TO 85in WALL) SURF MNT	$ 1,103	74.26	T	T	F	F
UniversalMod	ZZUN8396	12in LOG HOP	$ 589	50.97	T	T	T	T
UniversalMod	ZZUN8396S	12in LOG HOP(SURFACE MOUNT)	$ 589	54.05	T	T	T	T
UniversalMod	ZZUN8417	THE HELIX (60in & 84in WALL)	$ 3,021	73.35	T	T	T	T
UniversalMod	ZZUN8428	16in LOG HOP	$ 618	53.94	T	T	T	T
UniversalMod	ZZUN8428S	16in LOG HOP(SURFACE MOUNT)	$ 618	57.02	T	T	T	T
Independent	ZZUN8478	SHORT FREE- STANDING TIMBER TRAIL BRIDGE	$ 4,040	132.09	T	T	T	T
Independent	ZZUN8478S	SHORT FREE- STANDING TIMBER TRAIL BRIDGE (SURF MOUNT)	$ 4,040	164.87	T	T	T	T
Independent	ZZUN8479	LONG FREE- STANDING TIMBER TRAIL BRIDGE	$ 5,248	169.92	T	T	T	T
Independent	ZZUN8479S	LONG FREE- STANDING TIMBER TRAIL BRIDGE (SURF MOUNT)	$ 5,248	202.70	T	T	T	T
UniversalMod	ZZUN8627	PLAYCUBE GROUND LEVEL - METAL	$ 7,906	333.26	T	T	T	T
UniversalMod	ZZUN8627S	PLAYCUBE GROUND LEVEL - METAL (SM)	$ 7,906	304.91	T	T	T	T
UniversalMod	ZZUN8628	PLAYCUBE ONE SIDED CONNECTION - METAL	$ 6,825	263.19	T	T	T	T
UniversalMod	ZZUN8646	PLAYCUBE TWO SIDED CONNECTION - METAL	$ 6,563	251.79	T	T	T	T
UniversalMod	ZZUN8647	PLAYCUBE THREE SIDED CONNECTION - METAL	$ 6,126	240.41	T	T	T	T
UniversalMod	ZZUN8721	INFILL PANEL FOR PLAYCUBE	$ 161	12.8	Y	Y	Y	Y
UniversalMod	ZZUN8722	PLAYCUBE - SENSORY KIT 1	$ 335	6.5	Y	Y	Y	Y
UniversalMod	ZZUN8723	PLAYCUBE - SENSORY KIT 2	$ 280	5.2	Y	Y	Y	Y
UniversalMod	ZZUN8724	PLAYCUBE - TEXTURED BASE	$ 260	6.4	Y	Y	Y	Y
UniversalMod	ZZUN8725	PLAYCUBE - DISCOVERY BASE	$ 405	6.5	Y	Y	Y	Y
UniversalMod	ZZUN8727	PLAYCUBE - GROUND LEVEL	$ 4,069	151.62	T	T	T	F
UniversalMod	ZZUN8727S	PLAYCUBE - GROUND LEVEL (SURFACE MOUNT)	$ 4,069	123.25	T	T	T	F
UniversalMod	ZZUN8728	PLAYCUBE - ABOVE GROUND - 1 SIDED CONNECTION	$ 3,555	98.50	T	T	T	F
UniversalMod	ZZUN8729	PLAYCUBE - CAP	$ 458	12.44	T	T	T	F
UniversalMod	ZZUN8730	PLAYCUBE - SLIDE AND BARRIERS	$ 7,502	278.20	T	T	T	F
UniversalMod	ZZUN8730S	PLAYCUBE - SLIDE AND BARRIERS (SURFACE MOUNT)	$ 7,502	265.41	T	T	T	F
UniversalMod	ZZUN8730SD	PLAYCUBE - SLIDE AND BARRIERS (4IN SM)	$ 7,752	267.60	T	T	T	F
UniversalMod	ZZUN8731	PLASTIC ELEVATED PLAYCUBE	$ 4,341	178.8	T	T	T	T
UniversalMod	ZZUN8731S	PLASTIC ELEVATED PLAYCUBE (SM)	$ 4,341	170.8	T	T	T	T
UniversalMod	ZZUN8731SD	PLASTIC ELEVATED PLAYCUBE (4IN SM)	$ 4,591	171.9	T	T	T	T
UniversalMod	ZZUN8732	STEEL ELEVATED PLAYCUBE	$ 8,273	355.7	T	T	T	T
UniversalMod	ZZUN8732S	STEEL ELEVATED PLAYCUBE (SM)	$ 8,273	347.7	T	T	T	T
UniversalMod	ZZUN8733	PLASTIC ELEVATED PLAYCUBE (NO CONNECTIONS)	$ 4,363	98.3	T	T	T	T
UniversalMod	ZZUN8734	STEEL ELEVATED PLAYCUBE (NO CONNECTIONS)	$ 8,266	275.3	T	T	T	T
UniversalMod	ZZUN8736	PLAYCUBES- SUPPORT POST- 4 CUBES HIGH	$ 195	19.29	T	T	T	T
UniversalMod	ZZUN8736S	PLAYCUBES- SUPPORT POST- 4 CUBES HIGH - SM	$ 195	27.05	T	T	T	T
UniversalMod	ZZUN8736SD	PLAYCUBES- SUPPORT POST- 4 CUBES HIGH - 4IN SM	$ 424	27.3	T	T	T	T
UniversalMod	ZZUN8737	PLAYCUBES- SUPPORT POST- 3 CUBES HIGH	$ 195	15.2	T	T	T	T
UniversalMod	ZZUN8737S	PLAYCUBES- SUPPORT POST- 3 CUBES HIGH - SM	$ 195	22.96	T	T	T	T
UniversalMod	ZZUN8737SD	PLAYCUBES- SUPPORT POST- 3 CUBES HIGH - 4IN SM	$ 424	23.2	T	T	T	T
UniversalMod	ZZUN8738	PLAYCUBES- SUPPORT POST- 2 CUBES HIGH	$ 174	11.12	T	T	T	T
UniversalMod	ZZUN8738S	PLAYCUBES- SUPPORT POST- 2 CUBES HIGH - SM	$ 174	18.87	T	T	T	T
UniversalMod	ZZUN8738SD	PLAYCUBES- SUPPORT POST- 2 CUBES HIGH - 4IN SM	$ 424	19.2	T	T	T	T
UniversalMod	ZZUN8739	MIGHTY DESCENT TO PLAYCUBES	$ 12,459	906.9	Y	Y	Y	N
UniversalMod	ZZUN8739SD	MIGHTY DESCENT TO PLAYCUBES (4IN SM)	$ 12,709	926.6	Y	Y	Y	N
UniversalMod	ZZUN8741	MIGHTY DESCENT W/ PRISM PASS TO PLAYCUBE	$ 17,839	1227	Y	Y	Y	N
UniversalMod	ZZUN8741SD	MIGHTY DESCENT W/ PRISM PASS TO PLAYCUBE (4IN SM)	$ 18,089	1257.4	Y	Y	Y	N
UniversalMod	ZZUN8742	PLAYCUBE EXTENSION SUPPORT POST - 4 CUBE HIGH	$ 541	94.9	Y	Y	Y	N
UniversalMod	ZZUN8742SD	PLAYCUBE EXTENSION SUPPORT POST - 4 CUBE HIGH (4IN SM)	$ 791	88.3	Y	Y	Y	N
UniversalMod	ZZUN8743SD	PLAYCUBE EXTENSION SUPPORT POST - 4 CUBE HIGH (EN ONLY)	$ 791	88.8	N	N	N	Y
UniversalMod	ZZUN8746	PLAYCUBE - ABOVE GROUND - 2 SIDED CONNECTION	$ 3,559	99.04	T	T	T	F
UniversalMod	ZZUN8747	PLAYCUBE - ABOVE GROUND - 3 SIDED CONNECTION	$ 3,559	99.58	T	T	T	F
UniversalMod	ZZUN8751	MIGHTY DESCENT TO PLAYCUBES - EN	$ 13,705	906.1	N	N	N	Y
UniversalMod	ZZUN8751SD	MIGHTY DESCENT TO PLAYCUBES - EN (4IN SM)	$ 13,955	935.5	N	N	N	Y
UniversalMod	ZZUN8752	MIGHTY DESCENT W/ PRISM PASS TO PLAYCUBE - EN	$ 19,625	1226.2	N	N	N	Y
UniversalMod	ZZUN8752SD	MIGHTY DESCENT W/ PRISM PASS TO PLAYCUBE - EN (4IN SM)	$ 19,875	1267.9	N	N	N	Y
UniversalMod	ZZUN8761	POLY CLIMBER - SMALL	$ 607	16.9	T	T	T	T
UniversalMod	ZZUN8761S	POLY CLIMBER - SMALL (SM)	$ 607	18.5	T	T	T	T

UniversalMod	ZZUN8761SD	POLY CLIMBER - SMALL (4IN SM)	$ 857	18.7	T	T	T	T
UniversalMod	ZZUN8762	POLY CLIMBER - LARGE	$ 1,419	61	T	T	T	T
UniversalMod	ZZUN8762S	POLY CLIMBER - LARGE (SM)	$ 1,419	64.1	T	T	T	T
UniversalMod	ZZUN8762SD	POLY CLIMBER - LARGE (4IN SM)	$ 1,669	64.6	T	T	T	T
UniversalMod	ZZUN8766	FRACTAL NET	$ 3,746	109.5	T	T	T	T
UniversalMod	ZZUN8766S	FRACTAL NET (SM)	$ 3,746	111	T	T	T	T
UniversalMod	ZZUN8766SD	FRACTAL NET (4IN SM)	$ 3,946	112.5	T	T	T	T
UniversalMod	ZZUN8767	TRANSFER STEP FOR FRACTAL NET	$ 786	42.2	T	T	T	T
UniversalMod	ZZUN8767S	TRANSFER STEP FOR FRACTAL NET (SM)	$ 786	48.5	T	T	T	T
UniversalMod	ZZUN8767SD	TRANSFER STEP FOR FRACTAL NET (4IN SM)	$ 1,036	49.3	T	T	T	T
UniversalMod	ZZUN8768	INCLINED PASSAGE	$ 650	35.6	T	T	T	T
UniversalMod	ZZUN8769	INCLINED PASSAGE (EN PLASTIC PLAYCUBES)	$ 825	42.3	T	T	T	T
UniversalMod	ZZUN8771	PASSAGE	$ 1,212	66	T	T	T	T
UniversalMod	ZZUN8801	12IN WOOD PILLAR	$ 1,695	140.81	F	F	F	F
UniversalMod	ZZUN8802	18IN WOOD PILLAR	$ 1,995	160.89	F	F	F	F
UniversalMod	ZZUN8803	24IN WOOD PILLAR	$ 2,250	181.51	F	F	F	F
UniversalMod	ZZUN8804	WOOD PILE	$ 12,200	1320.01	F	F	F	F
UniversalMod	ZZUN8805	STUMP CLIMBER	$ 10,258	990.01	F	F	F	F
UniversalMod	ZZUN8806	OAK TRUNK	$ 22,400	3300.01	F	F	F	F
UniversalMod	ZZUN8807	4FT LOG CRAWL	$ 6,047	1364.01	F	F	F	F
UniversalMod	ZZUN8811	12IN STONE PILLAR	$ 1,695	140.81	F	F	F	F
UniversalMod	ZZUN8812	18IN STONE PILLAR	$ 1,995	160.89	F	F	F	F
UniversalMod	ZZUN8813	24IN STONE PILLAR	$ 2,250	181.51	F	F	F	F
UniversalMod	ZZUN8814	BOULDER CLIMBER	$ 3,300	550.01	F	F	F	F
UniversalMod	ZZUN8815	LITTLE RIDGE	$ 17,500	3850.01	F	F	F	F
UniversalMod	ZZUN8927	PLAYCUBE PERF ROOF - METAL	$ 972	16.88	T	T	T	T
UniversalMod	ZZUN8936	PLAYCUBES- SUPPORT POST- 4 CUBES HIGH- METAL	$ 203	27.78	T	T	T	T
UniversalMod	ZZUN8936S	PLAYCUBES- SUPPORT POST- 4 CUBES HIGH (SM)- METAL	$ 218	35.17	T	T	T	T
UniversalMod	ZZUN8937	PLAYCUBES- SUPPORT POST- 3 CUBES HIGH- METAL	$ 203	23.64	T	T	T	T
UniversalMod	ZZUN8937S	PLAYCUBES- SUPPORT POST- 3 CUBES HIGH (SM)- METAL	$ 203	31.04	T	T	T	T
UniversalMod	ZZUN8938	PLAYCUBES- SUPPORT POST- 2 CUBE HIGH- METAL	$ 174	19.51	T	T	T	T
UniversalMod	ZZUN8938S	PLAYCUBES- SUPPORT POST- 2 CUBE HIGH (SM)- METAL	$ 174	26.91	T	T	T	T
UniversalMod	ZZUN9098	METAL PLAYCUBE - SLIDE & BARRIERS	$ 14,021	363.23	T	T	T	T
UniversalMod	ZZUN9098S	METAL PLAYCUBE - SLIDE & BARRIERS (SM)	$ 14,021	359.96	T	T	T	T
UniversalMod	ZZUN9390	6in WHEELCHAIR RAMP CENTERSUPPORT	$ 130	7.93	T	T	T	T
UniversalMod	ZZUN9390S	6in WHEELCHAIR RAMP CENTERSUPPORT (SURFACE MOUNT)	$ 130	6.28	T	T	T	T
UniversalMod	ZZUN9396	4in & 8in WHEELCHAIR RAMP CENTER SUPPORTS	$ 240	15.90	T	T	T	T
UniversalMod	ZZUN9396S	4in & 8in WHEELCHAIR RAMP CENTER SUPPORTS (SM)	$ 240	12.70	T	T	T	T
UniversalMod	ZZUN9397	(2) 12in WHEELCHAIR RAMP CENTER SUPPORTS	$ 279	18.70	T	T	T	T
UniversalMod	ZZUN9397S	(2) 12in WHEELCHAIR RAMP CENTER SUPPORTS (SM)	$ 279	15.60	T	T	T	T
UniversalMod	ZZUN9398	16in & 20in WHEELCHAIR RAMP CENTER SUPPORTS	$ 283	21.70	T	T	T	T
UniversalMod	ZZUN9398S	16in & 20in WHEELCHAIR RAMP CENTER SUPPORTS (SM)	$ 283	18.50	T	T	T	T
UniversalMod	ZZUN9399	(2) 24in WHEELCHAIR RAMP CENTER SUPPORTS	$ 301	24.70	T	T	T	T
UniversalMod	ZZUN9399S	(2) 24in WHEELCHAIR RAMP CENTER SUPPORTS (SM)	$ 301	21.40	T	T	T	T
UniversalMod	ZZUN9400	18in WHEELCHAIR RAMP CENTERSUPPORT	$ 142	10.79	T	T	T	T
UniversalMod	ZZUN9400S	18in WHEELCHAIR RAMP CENTERSUPPORT (SURFACE MOUNT)	$ 142	9.25	T	T	T	T
UniversalMod	ZZUN9406	28in & 32in WHEELCHAIR RAMP CENTER SUPPORTS	$ 317	27.50	T	T	T	T
UniversalMod	ZZUN9406S	28in & 32in WHEELCHAIR RAMP CENTER SUPPORTS (SM)	$ 317	23.30	T	T	T	T
UniversalMod	ZZUN9407	(2) 36in WHEELCHAIR RAMP CENTER SUPPORTS	$ 323	30.40	T	T	T	T
UniversalMod	ZZUN9407S	(2) 36in WHEELCHAIR RAMP CENTER SUPPORTS (SM)	$ 323	27.10	T	T	T	T
UniversalMod	ZZUN9408	40in & 44in WHEELCHAIR RAMP CENTER SUPPORTS	$ 432	33.30	T	T	T	T
UniversalMod	ZZUN9408S	40in & 44in WHEELCHAIR RAMP CENTER SUPPORTS (SM)	$ 432	30.00	T	T	T	T
UniversalMod	ZZUN9409	(2) 48in WHEELCHAIR RAMP CENTER SUPPORTS	$ 444	36.10	T	T	T	T
UniversalMod	ZZUN9409S	(2) 48in WHEELCHAIR RAMP CENTER SUPPORTS (SM)	$ 444	33.00	T	T	T	T
UniversalMod	ZZUN9410	30in WHEELCHAIR RAMP CENTERSUPPORT	$ 164	13.76	T	T	T	T
UniversalMod	ZZUN9410S	30in WHEELCHAIR RAMP CENTERSUPPORT (SURFACE MOUNT)	$ 164	12.11	T	T	T	T
UniversalMod	ZZUN9416	52in & 56in WHEELCHAIR RAMP CENTER SUPPORTS	$ 454	39.10	T	T	T	T
UniversalMod	ZZUN9416S	52in & 56in WHEELCHAIR RAMP CENTER SUPPORTS (SM)	$ 454	35.90	T	T	T	T
UniversalMod	ZZUN9417	(2) 60in WHEELCHAIR RAMP CENTER SUPPORTS	$ 465	42.00	T	T	T	T
UniversalMod	ZZUN9417S	(2) 60in WHEELCHAIR RAMP CENTER SUPPORTS (SM)	$ 465	38.70	T	T	T	T
UniversalMod	ZZUN9418	64in & 68in WHEELCHAIR RAMP CENTER SUPPORTS	$ 476	44.80	T	T	T	T
UniversalMod	ZZUN9418S	64in & 68in WHEELCHAIR RAMP CENTER SUPPORTS (SM)	$ 476	41.70	T	T	T	T
UniversalMod	ZZUN9419	(2) 72in WHEELCHAIR RAMP CENTER SUPPORTS	$ 491	47.80	T	T	T	T
UniversalMod	ZZUN9419S	(2) 72in WHEELCHAIR RAMP CENTER SUPPORTS (SM)	$ 491	44.70	T	T	T	T
UniversalMod	ZZUN9420	42in WHEELCHAIR RAMP CENTERSUPPORT	$ 382	16.62	T	T	T	T
UniversalMod	ZZUN9420S	42in WHEELCHAIR RAMP CENTERSUPPORT (SURFACE MOUNT)	$ 382	14.97	T	T	T	T
UniversalMod	ZZUN9430	54in WHEELCHAIR RAMP CENTERSUPPORT	$ 174	19.48	T	T	T	T
UniversalMod	ZZUN9430S	54in WHEELCHAIR RAMP CENTERSUPPORT (SURFACE MOUNT)	$ 174	17.94	T	T	T	T
UniversalMod	ZZUN9440	66in WHEELCHAIR RAMP CENTERSUPPORT	$ 205	22.45	T	T	T	T
UniversalMod	ZZUN9440S	66in WHEELCHAIR RAMP CENTERSUPPORT (SURFACE MOUNT)	$ 205	20.80	T	T	T	T
UniversalMod	ZZUN9490	12in WHEELCHAIR RAMP CENTERSUPPORT	$ 130	9.36	T	T	T	T
UniversalMod	ZZUN9490S	12in WHEELCHAIR RAMP CENTERSUPPORT (SURFACE MOUNT)	$ 130	7.82	T	T	T	T
UniversalMod	ZZUN9500	24in WHEELCHAIR RAMP CENTERSUPPORT	$ 142	12.33	T	T	T	T
UniversalMod	ZZUN9500S	24in WHEELCHAIR RAMP CENTERSUPPORT (SURFACE MOUNT)	$ 142	10.68	T	T	T	T
UniversalMod	ZZUN9510	36in WHEELCHAIR RAMP CENTERSUPPORT	$ 152	15.19	T	T	T	T
UniversalMod	ZZUN9510S	36in WHEELCHAIR RAMP CENTERSUPPORT (SURFACE MOUNT)	$ 152	13.54	T	T	T	T
UniversalMod	ZZUN9520	48in WHEELCHAIR RAMP CENTERSUPPORT	$ 170	18.05	T	T	T	T
UniversalMod	ZZUN9520S	48in WHEELCHAIR RAMP CENTERSUPPORT (SURFACE MOUNT)	$ 170	16.51	T	T	T	T
UniversalMod	ZZUN9530	60in WHEELCHAIR RAMP CENTERSUPPORT	$ 174	21.02	T	T	T	T
UniversalMod	ZZUN9530S	60in WHEELCHAIR RAMP CENTERSUPPORT (SURFACE MOUNT)	$ 174	19.37	T	T	T	T
UniversalMod	ZZUN9540	72in WHEELCHAIR RAMP CENTERSUPPORT	$ 205	23.88	T	T	T	T

UniversalMod	ZZUN9540S	72in WHEELCHAIR RAMP CENTERSUPPORT (SURFACE MOUNT)	$ 205	22.34	T	T	T	T
UniversalMod	ZZUN9570	36IN STAINLESS STEEL SLIDE W/ SLIDE-A-SIDE (LEFT)	$ 10,337	130.9	T	T	T	T
UniversalMod	ZZUN9570S	36IN STAINLESS STEEL SLIDE W/ SLIDE-A-SIDE (LEFT) (SM)	$ 10,337	115.3	T	T	T	T
UniversalMod	ZZUN9571	48IN STAINLESS STEEL SLIDE W/ SLIDE-A-SIDE (LEFT)	$ 11,789	148.4	T	T	T	T
UniversalMod	ZZUN9571S	48IN STAINLESS STEEL SLIDE W/ SLIDE-A-SIDE (LEFT) (SM)	$ 11,789	132.8	T	T	T	T
UniversalMod	ZZUN9572	60IN STAINLESS STEEL SLIDE W/ SLIDE-A-SIDE (LEFT)	$ 12,684	168.7	T	T	T	T
UniversalMod	ZZUN9572S	60IN STAINLESS STEEL SLIDE W/ SLIDE-A-SIDE (LEFT) (SM)	$ 12,684	153.1	T	T	T	T
UniversalMod	ZZUN9573	72IN STAINLESS STEEL SLIDE W/ SLIDE-A-SIDE (LEFT)	$ 14,382	191.5	T	T	T	T
UniversalMod	ZZUN9573S	72IN STAINLESS STEEL SLIDE W/ SLIDE-A-SIDE (LEFT) (SM)	$ 14,382	175.9	T	T	T	T
UniversalMod	ZZUN9574	96IN STAINLESS STEEL SLIDE W/ SLIDE-A-SIDE (LEFT)	$ 15,910	242.8	T	T	T	T
UniversalMod	ZZUN9574S	96IN STAINLESS STEEL SLIDE W/ SLIDE-A-SIDE (LEFT) (SM)	$ 15,910	227.3	T	T	T	T
UniversalMod	ZZUN9575	36IN STAINLESS STEEL SLIDE W/ SLIDE-A-SIDE (RIGHT)	$ 10,337	130.9	T	T	T	T
UniversalMod	ZZUN9575S	36IN STAINLESS STEEL SLIDE W/ SLIDE-A-SIDE (RIGHT) (SM)	$ 10,337	115.3	T	T	T	T
UniversalMod	ZZUN9576	48IN STAINLESS STEEL SLIDE W/ SLIDE-A-SIDE (RIGHT)	$ 11,789	148.4	T	T	T	T
UniversalMod	ZZUN9576S	48IN STAINLESS STEEL SLIDE W/ SLIDE-A-SIDE (RIGHT) (SM)	$ 11,789	132.8	T	T	T	T
UniversalMod	ZZUN9577	60IN STAINLESS STEEL SLIDE W/ SLIDE-A-SIDE (RIGHT)	$ 12,684	168.7	T	T	T	T
UniversalMod	ZZUN9577S	60IN STAINLESS STEEL SLIDE W/ SLIDE-A-SIDE (RIGHT) (SM)	$ 12,684	153.1	T	T	T	T
UniversalMod	ZZUN9578	72IN STAINLESS STEEL SLIDE W/ SLIDE-A-SIDE (RIGHT)	$ 14,382	191.5	T	T	T	T
UniversalMod	ZZUN9578S	72IN STAINLESS STEEL SLIDE W/ SLIDE-A-SIDE (RIGHT) (SM)	$ 14,382	175.9	T	T	T	T
UniversalMod	ZZUN9579	96IN STAINLESS STEEL SLIDE W/ SLIDE-A-SIDE (RIGHT)	$ 15,910	242.8	T	T	T	T
UniversalMod	ZZUN9579S	96IN STAINLESS STEEL SLIDE W/ SLIDE-A-SIDE (RIGHT) (SM)	$ 15,910	227.3	T	T	T	T
UniversalMod	ZZUN9999	HILL SLIDE WEDGE SET	$ 1,295	25.64	F	F	F	F

Category	Part Number	DESCRIPTION	List Price ($ USD)	Weight (lbs)	ADA Certified	ASTM Certified	CPSC Compliant	CSA Certified	EN Certified
Adventure Series	PE-705	The Weave	$ 15,783	784 lbs	T	T	T	T	F
Adventure Series	PE-905	Circuit	$ 28,024	1234 lbs	T	T	T	T	F
Balance Trax	BT-1201	Balance Trax Playground	$ 15,396	930 lbs	T	T	T	T	T
Balance Trax	BT-1202	Round the Bend	$ 8,298	534 lbs	T	T	T	T	T
Bambino	ACT-1300	Playville	$ 47,155	2356 lbs	T	T	T	+	T
Bambino	ACT-1300	Playville	$ 47,155	2356 lbs	T	T	T	+	T
Bambino	ACT-1301	Tot Spot	$ 20,164	1200 lbs	T	T	T	+	+
Bambino	ACT-1302	Kiddie Corner	$ 31,936	1696 lbs	T	T	T	+	+
Bambino	ACT-1303	Funburg	$ 39,628	2024 lbs	T	T	T	+	+
Branch Out®	500-1929	Gateway	$ 20,059	1272 lbs	T	T	T	T	T
Branch Out®	500-1950	Whistle Stop	$ 109,549	5220 lbs	T	T	T	T	F
Branch Out®	500-1951	Adventure Grove	$ 114,205	5695 lbs	T	T	T	T	F
Branch Out®	500-1952	Cosmopolitan	$ 129,695	6751 lbs	T	T	T	+	F
Branch Out®	500-1953	Forest Hamlet	$ 135,364	8179 lbs	T	T	T	+	F
Branch Out®	500-2050	Cal's Place	$ 108,905	5077 lbs	T	T	T	T	F
Branch Out®	500-2051	Ally's Arbor	$ 123,859	6398 lbs	T	T	T	T	F
Branch Out®	500-2052	Landon's Treehouse	$ 154,635	7685 lbs	T	T	T	+	F
Branch Out®	500-2350	Orchard	$ 155,665	7399 lbs	T	T	T	T	F
Challengers®	350-1010	Turnabout	$ 47,180	2436 lbs	T	T	T	+	F
Challengers®	350-1100	The Squire's Fortress	$ 26,963	1381 lbs	T	T	T	+	F
Challengers®	350-1101	Ahoy Matey	$ 56,289	2455 lbs	T	T	T	+	+
Challengers®	350-1420	Island Getaway	$ 32,708	1869 lbs	T	T	T	+	T
Challengers®	350-1425	Fort Wilderness	$ 43,231	2471 lbs	T	T	T	+	F
Challengers®	350-1430	Music Center	$ 10,910	424 lbs	T	T	T	T	T
Challengers®	350-1431	Rhythm Wall	$ 10,984	420 lbs	T	T	T	T	T
Challengers®	350-1432	Button Loop	$ 5,770	277 lbs	T	T	T	T	T
Challengers®	350-1433	Button Trail	$ 11,540	552 lbs	T	T	T	T	T
Challengers®	350-1516	Minnow	$ 43,741	2500 lbs	T	T	T	+	+
Challengers®	350-1517	Safari	$ 48,199	2800 lbs	T	T	T	T	F
Challengers®	350-1520	Hop, Skip & Slide	$ 37,274	1922 lbs	T	T	T	+	F
Challengers®	350-1637	350-1637	$ 29,020	1619 lbs	T	T	T	+	F
Challengers®	350-1701	Fort Wildwood	$ 51,930	3811 lbs	T	T	T	+	F
Challengers®	350-1704	Boondocks	$ 86,716	4637 lbs	T	T	T	+	F
Challengers®	350-1705	Canyon's Cross	$ 106,549	4700 lbs	T	T	T	+	+
Challengers®	350-1713	Woodland Manor	$ 300,568	19336 lbs	T	T	T	+	F
Challengers®	350-1714	350-1714	$ 16,899	785 lbs	T	T	T	+	F
Challengers®	350-1715	Washington	$ 20,615	1275 lbs	T	T	T	+	F
Challengers®	350-1717	350-1717	$ 25,187	1393 lbs	T	T	T	+	F
Challengers®	350-1718	350-1718	$ 31,162	2030 lbs	T	T	T	+	F
Challengers®	350-1731	350-1731	$ 16,200	1042 lbs	T	T	T	+	F
Challengers®	350-1733	350-1733	$ 42,710	2233 lbs	T	T	T	+	F
Challengers®	350-1734	350-1734	$ 61,694	3203 lbs	T	T	T	F	F
Challengers®	350-1736	350-1736	$ 21,988	1399 lbs	T	T	T	+	F
Challengers®	350-1738	350-1738	$ 18,447	1030 lbs	T	T	T	+	F
Challengers®	350-1739	350-1739	$ 19,570	1313 lbs	T	T	T	+	F
Challengers®	350-1740	350-1740	$ 37,701	2342 lbs	T	T	T	+	F
Challengers®	350-1741	350-1741	$ 39,122	2216 lbs	T	T	T	+	F
Challengers®	350-1742	350-1742	$ 40,047	2536 lbs	T	T	T	+	F
Challengers®	350-1743	350-1743	$ 49,061	2817 lbs	T	T	T	+	F
Challengers®	350-1744	350-1744	$ 90,303	4707 lbs	T	T	T	+	F

Legend	
T	TRUE
F	FALSE
+	Needs Modification

Challengers®	350-1801	Fun Factory	$ 57,977	3588 lbs	T	T	T	+	+
Challengers®	350-1807	Crown Jewels	$ 126,793	6478 lbs	T	T	T	+	F
Challengers®	350-1811	350-1811	$ 19,193	1222 lbs	T	T	T	+	F
Challengers®	350-1812	350-1812	$ 19,778	1229 lbs	T	T	T	+	F
Challengers®	350-1814	Jefferson	$ 23,640	1534 lbs	T	T	T	+	F
Challengers®	350-1815	Jefferson W/ Shade	$ 30,128	1720 lbs	T	T	T	+	F
Challengers®	350-1816	Natural Bridge	$ 25,256	1587 lbs	T	T	T	F	F
Challengers®	350-1820	Watchtower	$ 15,193	638 lbs	T	T	T	T	+
Challengers®	350-1824	Jolly Roger	$ 47,424	2331 lbs	T	T	T	+	+
Challengers®	350-1827	Wilson w/ Shade	$ 24,222	1700 lbs	T	T	T	+	F
Challengers®	350-1828	350-1828	$ 17,415	1047 lbs	T	T	T	+	F
Challengers®	350-1829	350-1829	$ 23,880	1228 lbs	T	T	T	+	F
Challengers®	350-1832	350-1832	$ 36,527	2319 lbs	T	T	T	+	F
Challengers®	350-1833	350-1833	$ 45,977	2935 lbs	T	T	T	+	F
Challengers®	350-1835	350-1835	$ 44,173	2554 lbs	T	T	T	+	F
Challengers®	350-1900	Fiesta Town	$ 46,057	2828 lbs	T	T	T	+	F
Challengers®	350-1901	On a Roll	$ 51,142	2861 lbs	T	T	T	+	F
Challengers®	350-1902	Hangout	$ 52,726	3280 lbs	T	T	T	+	F
Challengers®	350-1903	Spindle	$ 57,007	2935 lbs	T	T	T	+	F
Challengers®	350-1906	Soundbox	$ 77,117	4282 lbs	T	T	T	+	F
Challengers®	350-1908	Camp Conifer	$ 75,612	4890 lbs	T	T	T	+	F
Challengers®	350-1909	GeoScramble	$ 84,421	4829 lbs	T	T	T	+	F
Challengers®	350-1915	Pirate's Cove	$ 105,503	6462 lbs	T	T	T	+	F
Challengers®	350-1922	Look Out Below	$ 28,069	1020 lbs	T	T	T	T	T
Challengers®	350-1923	Fort Twist	$ 36,806	1943 lbs	T	T	T	+	+
Challengers®	350-1925	Finish Line	$ 42,805	2443 lbs	T	T	T	+	+
Challengers®	350-1928	Zelda's Fortress	$ 74,327	3446 lbs	T	T	T	+	+
Challengers®	350-1960	Harrison	$ 19,986	1298 lbs	T	T	T	+	F
Challengers®	350-1962	Lilah's Lookout	$ 22,966	1393 lbs	T	T	T	+	+
Challengers®	350-1967	350-1967	$ 32,846	2065 lbs	T	T	T	+	F
Challengers®	350-1970	350-1970	$ 33,444	2225 lbs	T	T	T	+	F
Challengers®	350-1972	Roosevelt	$ 52,529	3180 lbs	T	T	T	+	F
Challengers®	350-1973	350-1973	$ 66,314	4425 lbs	T	T	T	+	F
Challengers®	350-1974	350-1974	$ 70,656	4107 lbs	T	T	T	F	F
Challengers®	350-2000	Hattie's Hideout	$ 29,820	1735 lbs	T	T	T	+	+
Challengers®	350-2001	Ella-vated	$ 39,055	2274 lbs	T	T	T	+	F
Challengers®	350-2002	Steel Zone	$ 56,314	2466 lbs	T	T	T	+	+
Challengers®	350-2003	Penn's Woods	$ 61,482	3425 lbs	T	T	T	+	F
Challengers®	350-2007	Very Violet	$ 91,808	4203 lbs	T	T	T	+	F
Challengers®	350-2020	Tic-Tac-Go!	$ 19,704	1169 lbs	T	T	T	+	+
Challengers®	350-2023	Caydence's Castle	$ 33,744	1664 lbs	T	T	T	+	F
Challengers®	350-2024	Naturally Fun	$ 34,823	2537 lbs	T	T	T	F	F
Challengers®	350-2025	Natural Nook	$ 38,141	2364 lbs	T	T	T	+	+
Challengers®	350-2026	Sarah's Palace	$ 56,284	2741 lbs	T	T	T	+	F
Challengers®	350-2062	350-2062	$ 20,190	1286 lbs	T	T	T	+	F
Challengers®	350-2063	350-2063	$ 20,564	1308 lbs	T	T	T	+	F
Challengers®	350-2064	350-2064	$ 23,753	1391 lbs	T	T	T	+	F
Challengers®	350-2067	350-2067	$ 29,122	1661 lbs	T	T	T	+	F
Challengers®	350-2069	350-2069	$ 35,499	2138 lbs	T	T	T	+	F
Challengers®	350-2072	350-2072	$ 23,105	1441 lbs	T	T	T	+	F
Challengers®	350-2073	350-2073	$ 24,161	1485 lbs	T	T	T	+	F
Challengers®	350-2074	350-2074	$ 35,655	2340 lbs	T	T	T	+	F
Challengers®	350-2075	Quincy	$ 37,094	1998 lbs	T	T	T	+	F

Challengers®	350-2076	350-2076	$ 37,218	1955 lbs	T	T	T	+	F
Challengers®	350-2077	350-2077	$ 37,934	2690 lbs	T	T	T	+	F
Challengers®	350-2078	350-2078	$ 45,423	2642 lbs	T	T	T	+	F
Challengers®	350-2079	350-2079	$ 50,131	3064 lbs	T	T	T	+	F
Challengers®	350-2080	350-2080	$ 54,833	3576 lbs	T	T	T	+	F
Challengers®	350-2100	Aanyah's Adventure	$ 28,821	1643 lbs	T	T	T	+	F
Challengers®	350-2100_PS	Aanyah's Adventure w/ PlaySoleil	$ 29,626	1674 lbs	T	T	T	+	F
Challengers®	350-2101	Hap's Happening	$ 37,307	2052 lbs	T	T	T	+	F
Challengers®	350-2102	Leila's Landing	$ 37,119	2121 lbs	T	T	T	+	F
Challengers®	350-2103	Maycee's Maze	$ 39,273	1656 lbs	T	T	T	+	F
Challengers®	350-2103_PS	Maycee's Maze w/ PlaySoleil	$ 39,756	1674 lbs	T	T	T	+	F
Challengers®	350-2104	Jack's Journey	$ 44,292	3013 lbs	T	T	T	+	F
Challengers®	350-2105	350-2105	$ 44,158	2356 lbs	T	T	T	+	F
Challengers®	350-2106	Kristina's Klimber	$ 55,627	3291 lbs	T	T	T	T	F
Challengers®	350-2107	Amelia's Expedition	$ 52,695	3330 lbs	T	T	T	+	F
Challengers®	350-2108	350-2108	$ 60,500	3025 lbs	T	T	T	+	F
Challengers®	350-2113	350-2113	$ 93,173	3913 lbs	T	T	T	+	F
Challengers®	350-2122	Diana's Dreamland	$ 30,403	1571 lbs	T	T	T	+	+
Challengers®	350-2123	Path Finder	$ 30,808	1806 lbs	T	T	T	+	F
Challengers®	350-2161	350-2161	$ 14,271	941 lbs	T	T	T	+	F
Challengers®	350-2164	Geo Mountain	$ 37,368	2418 lbs	T	T	T	+	F
Challengers®	350-2165	Slide Shuffle	$ 17,767	1088 lbs	T	T	T	+	F
Challengers®	350-2166	350-2166	$ 28,103	1735 lbs	T	T	T	+	F
Challengers®	350-2167	Asteroid Landing	$ 18,317	1106 lbs	T	T	T	+	F
Challengers®	350-2168	350-2168	$ 29,924	1521 lbs	T	T	T	+	F
Challengers®	350-2169	350-2169	$ 31,142	1852 lbs	T	T	T	+	F
Challengers®	350-2170	350-2170	$ 30,291	1650 lbs	T	T	T	+	F
Challengers®	350-2171	350-2171	$ 31,890	1996 lbs	T	T	T	+	F
Challengers®	350-2172	350-2172	$ 36,552	1683 lbs	T	T	T	+	F
Challengers®	350-2175	350-2175	$ 39,434	2505 lbs	T	T	T	+	F
Challengers®	350-2178	350-2178	$ 53,396	3242 lbs	T	T	T	+	F
Challengers®	350-2179	350-2179	$ 53,943	3180 lbs	T	T	T	+	F
Challengers®	350-2180	350-2180	$ 15,992	907 lbs	T	T	T	T	F
Challengers®	350-2181	350-2181	$ 21,303	1207 lbs	T	T	T	+	F
Challengers®	350-2184	350-2184	$ 33,689	2147 lbs	T	T	T	+	F
Challengers®	350-2185	350-2185	$ 21,515	1296 lbs	T	T	T	+	F
Challengers®	350-2186	350-2186	$ 24,469	1497 lbs	T	T	T	+	F
Challengers®	350-2200	Up & Over	$ 29,326	1794 lbs	T	T	T	+	F
Challengers®	350-2201	Trailblazer	$ 50,483	3129 lbs	T	T	T	+	F
Challengers®	350-2202	Trailblazer w/ Shade	$ 58,026	4169 lbs	T	T	F	+	F
Challengers®	350-2203	Jungle Excursion	$ 49,826	2202 lbs	T	T	T	+	F
Challengers®	350-2204	Adventure Mountain	$ 60,691	3745 lbs	T	T	T	+	F
Challengers®	350-2204_PS	Adventure Mountain w/ PlaySoleil	$ 60,943	3751 lbs	T	T	T	+	F
Challengers®	350-2220	Log Slide	$ 16,526	112 lbs	T	T	T	+	F
Challengers®	350-2221	Tot Lot	$ 20,919	1150 lbs	T	T	T	+	F
Challengers®	350-2223	Schoolyard Junction w/ Shade	$ 35,484	2192 lbs	T	T	T	+	F
Challengers®	350-2224	Timber Grove	$ 30,656	1777 lbs	T	T	T	F	F
Challengers®	350-2225	Step & Slide	$ 33,055	1579 lbs	T	T	T	T	F
Challengers®	350-2226	Triplex	$ 34,090	1787 lbs	T	T	T	+	F
Challengers®	350-2227	Northern Lights	$ 43,066	2725 lbs	T	T	T	+	F
Challengers®	350-2230	350-2230	$ 11,369	670 lbs	T	T	T	+	F
Challengers®	350-2231	350-2231	$ 15,874	876 lbs	T	T	T	+	F
Challengers®	350-2232	350-2232	$ 22,339	1065 lbs	T	T	T	+	F

Challengers®	350-2233	350-2233	$ 18,267	1148 lbs	T	T	T	+	F
Challengers®	350-2236	350-2236	$ 27,994	1659 lbs	T	T	T	+	F
Challengers®	350-2237	350-2237	$ 20,709	1290 lbs	T	T	T	+	F
Challengers®	350-2238	350-2238	$ 25,851	1625 lbs	T	T	T	+	F
Challengers®	350-2239	350-2239	$ 36,407	2370 lbs	T	T	F	+	F
Challengers®	350-2240	350-2240	$ 46,148	3207 lbs	T	T	T	+	F
Challengers®	350-2241	350-2241	$ 36,631	2276 lbs	T	T	T	+	F
Challengers®	350-2243	350-2243	$ 22,889	1495 lbs	T	T	T	+	F
Challengers®	350-2244	350-2244	$ 28,744	1708 lbs	T	T	T	+	F
Challengers®	350-2245	350-2245	$ 34,398	2231 lbs	T	T	T	+	F
Challengers®	350-2246	350-2246	$ 34,566	2340 lbs	T	T	T	F	F
Challengers®	350-2247	350-2247	$ 36,234	2402 lbs	T	T	T	+	F
Challengers®	350-2248	350-2248	$ 36,259	2307 lbs	T	T	T	+	F
Challengers®	350-2249	350-2249	$ 41,360	2607 lbs	T	T	T	+	F
Challengers®	350-2250	350-2250	$ 55,768	4037 lbs	T	T	T	+	F
Challengers®	350-2251	350-2251	$ 49,195	2891 lbs	T	T	T	+	F
Challengers®	350-2252	350-2252	$ 49,898	3148 lbs	T	T	T	+	F
Challengers®	350-2253	350-2253	$ 22,400	1043 lbs	T	T	T	+	F
Challengers®	350-2255	350-2255	$ 25,450	1483 lbs	T	T	T	+	F
Challengers®	350-2256	350-2256	$ 25,931	1509 lbs	T	T	T	+	F
Challengers®	350-2257	350-2257	$ 22,143	1327 lbs	T	T	T	+	F
Challengers®	350-2258	350-2258	$ 35,742	2120 lbs	T	T	T	+	F
Challengers®	350-2259	350-2259	$ 42,230	2302 lbs	T	T	T	+	F
Challengers®	350-2261	350-2261	$ 42,644	3145 lbs	T	T	T	+	F
Challengers®	350-2263	350-2263	$ 31,430	2070 lbs	T	T	T	+	F
Challengers®	350-2266	350-2266	$ 40,107	2517 lbs	T	T	T	+	F
Challengers®	350-2269	350-2269	$ 59,939	333 lbs	T	T	T	+	F
Challengers®	350-2270	350-2270	$ 71,097	4091 lbs	T	T	T	+	F
Challengers®	350-2302	Tree Frog Forest	$ 69,073	4102 lbs	T	T	T	+	F
Challengers®	350-2304	Rockin' Reef	$ 104,059	6170 lbs	T	T	T	+	F
Challengers®	350-2308	350-2308	$ 32,282	1929 lbs	T	T	T	+	F
Challengers®	350-2320	Scavenger's Castle	$ 24,002	1290 lbs	T	T	T	+	F
Challengers®	350-2330	350-2330	$ 9,503	586 lbs	T	T	T	+	F
Challengers®	350-2332	350-2332	$ 12,928	662 lbs	T	T	T	+	F
Challengers®	350-2333	350-2333	$ 15,968	768 lbs	T	T	T	+	F
Challengers®	350-2334	350-2334	$ 19,420	851 lbs	T	T	T	+	F
Challengers®	350-2337	350-2337	$ 11,623	804 lbs	T	T	T	+	F
Challengers®	350-2338	350-2338	$ 20,468	1513 lbs	T	T	T	+	F
Challengers®	350-2339	350-2339	$ 27,354	1996 lbs	T	T	T	+	F
Challengers®	350-2340	350-2340	$ 31,791	1881 lbs	T	T	T	+	F
Challengers®	350-2341	350-2341	$ 33,055	1857 lbs	T	T	T	+	F
Challengers®	350-2401	Dragonfly Den	$ 59,480	3882 lbs	T	T	T	+	F
Challengers®	350-2402	350-2402	$ 51,858	3035 lbs	T	T	T	+	F
Challengers®	350-2403	Canary Circuit	$ 69,481	4668 lbs	T	T	T	+	F
Challengers®	350-2404	Cardinal Zone	$ 102,049	4883 lbs	T	T	T	+	F
Challengers®	350-2420	Rebel Rock	$ 18,153	1070 lbs	T	T	T	+	F
Challengers®	350-2421	Primary Safari	$ 50,116	2936 lbs	T	T	T	+	F
Challengers®	350-2422	Sonic Station	$ 61,621	3580 lbs	T	T	T	+	F
Challengers®	350-2430	350-2430	$ 31,446	1832 lbs	T	T	T	+	F
Challengers®	350-2431	350-2431	$ 37,597	2471 lbs	T	T	T	+	F
Challengers®	350-2432	350-2432	$ 34,252	2274 lbs	T	T	T	+	F
Challengers®	350-2433	350-2433	$ 46,069	2637 lbs	T	T	T	+	F
Challengers®	350-2434	350-2434	$ 51,907	3174 lbs	T	T	T	+	F

Challengers®	350-2435	350-2435	$ 61,925	3659 lbs	T	T	T	F	F
Challengers®	350-BELL	Bell Panel	$ 2,313	108 lbs	T	T	T	T	T
Challengers®	350-CHIME	Chime Panel	$ 2,656	116 lbs	T	T	T	T	T
Challengers®	350-DRUM	Drum Panel	$ 2,175	106 lbs	T	T	T	T	T
Challengers®	350-HORN	Horn Panel	$ 2,481	104 lbs	T	T	T	T	T
Challengers®	350-MONO	Monorail	$ 7,868	333 lbs	T	T	T	+	F
Challengers®	350-RAIL	Sky Rail	$ 6,502	436 lbs	T	T	T	T	T
Challengers®	350-SPIN	Spin Central	$ 2,359	103 lbs	T	T	T	T	T
Challengers®	350-TTT	Tic-Tac-Toe Panel	$ 2,470	106 lbs	T	T	T	T	T
Challengers®	350-VORTEX	Vortex	$ 5,285	335 lbs	T	T	T	T	T
Challengers®	350-1722	Blast Off	$ 40,563	2113 lbs	T	T	T	+	T
Climbing Squares	QB-1601	Islands	$ 4,246	220 lbs	T	T	T	T	T
Climbing Squares	QB-1602	Hillocks	$ 6,283	316 lbs	T	T	T	T	T
Climbing Squares	QB-1603	Mini Mountains	$ 10,085	522 lbs	T	T	T	T	T
Climbing Squares	QB-1604	Blockfield	$ 3,249	169 lbs	T	T	T	T	T
Climbing Squares	QB-1605	Drift	$ 3,732	190 lbs	T	T	T	T	T
Climbing Squares	QB-1606	Cliffs	$ 4,675	241 lbs	T	T	T	T	T
Climbing Squares	QB-1607	Ridge	$ 6,537	325 lbs	T	T	T	T	F
Climbing Squares	QB-1608	Knobs	$ 4,899	253 lbs	T	T	T	T	T
ENERGI®	ENERGI-PR-500	Complete 5-Station System	$ 31,337	1429 lbs	T	F	F	F	F
ENERGI®	ENERGI-PR-500-SM	Complete 5-Station System	$ 31,337	1315 lbs	T	F	F	F	F
FirstPlay™ Toddler	FP-505	Design #1	$ 4,126	110 lbs	T	T	T	F	F
FirstPlay™ Toddler	FP-505-FTD	Design #1	$ 4,787	146 lbs	T	T	T	F	F
FirstPlay™ Toddler	FP-510	Design #2	$ 5,269	172 lbs	T	T	T	F	F
FirstPlay™ Toddler	FP-510-FTD	Design #2	$ 5,727	195 lbs	T	T	T	F	F
FirstPlay™ Toddler	FP-515	Design #3	$ 4,868	140 lbs	T	T	T	F	F
FirstPlay™ Toddler	FP-515-FTD	Design #3	$ 5,732	188 lbs	T	T	T	F	F
FirstPlay™ Toddler	FP-520	Design #4	$ 6,204	202 lbs	T	T	T	F	F
FirstPlay™ Toddler	FP-520-FTD	Design #4	$ 6,865	238 lbs	T	T	T	F	F
FirstPlay™ Toddler	FP-525	Design #5	$ 6,844	191 lbs	T	T	T	F	F
FirstPlay™ Toddler	FP-525-FTD	Design #5	$ 7,937	251 lbs	T	T	T	F	F
FirstPlay™ Toddler	FP-530	Design #6	$ 8,180	254 lbs	T	T	T	F	F
FirstPlay™ Toddler	FP-530-FTD	Design #6	$ 9,070	301 lbs	T	T	T	F	F
FirstPlay™ Toddler	FP-535	Design #7	$ 11,716	366 lbs	T	T	T	F	F
FirstPlay™ Toddler	FP-535-FTD	Design #7	$ 13,241	449 lbs	T	T	T	F	F
FirstPlay™ Toddler	FP-540	Design #8	$ 10,683	330 lbs	T	T	T	F	F
FirstPlay™ Toddler	FP-540-FTD	Design #8	$ 11,802	388 lbs	T	T	T	F	F
Fun Centers™	FC02-700	Design #1	$ 10,845	695 lbs	T	T	T	+	+
Fun Centers™	FC02-701	Design #1	$ 10,757	641 lbs	T	T	T	+	+
Fun Centers™	FC02-702	Design #2	$ 13,844	756 lbs	T	T	T	+	+
Fun Centers™	FC02-703	Design #2	$ 13,756	702 lbs	T	T	T	+	+
Fun Centers™	FC02-704	Design #3	$ 16,146	866 lbs	T	T	T	+	+
Fun Centers™	FC02-705	Design #3	$ 16,058	812 lbs	T	T	T	+	+
Fun Centers™	FC02-706	Design #4	$ 19,463	1001 lbs	T	T	T	+	+
Fun Centers™	FC02-707	Design #4	$ 19,375	947 lbs	T	T	T	+	+
Fun Centers™	FC02-708	Design #5	$ 20,951	1372 lbs	T	T	T	+	+
Fun Centers™	FC02-709	Design #5	$ 20,775	1264 lbs	T	T	T	+	+
Fun Centers™	FC02-710	Design #6	$ 24,686	1460 lbs	T	T	T	+	+
Fun Centers™	FC02-711	Design #6	$ 24,510	1352 lbs	T	T	T	+	+
Fun Centers™	FC02-712	Design #7	$ 33,593	1997 lbs	T	T	T	+	+
Fun Centers™	FC02-713	Design #7	$ 33,329	1835 lbs	T	T	T	+	+
Fun Centers™	FC02-714	Design #8	$ 39,869	2217 lbs	T	T	T	+	+
Fun Centers™	FC02-715	Design #8	$ 39,605	2055 lbs	T	T	T	+	+

Fun Centers™	FC12-700	Design #1	$ 11,570	726 lbs	T	T	T	+	+
Fun Centers™	FC12-701	Design #1	$ 11,482	673 lbs	T	T	T	+	+
Fun Centers™	FC12-702	Design #2	$ 14,631	791 lbs	T	T	T	+	+
Fun Centers™	FC12-703	Design #2	$ 14,543	737 lbs	T	T	T	+	+
Fun Centers™	FC12-704	Design #3	$ 17,076	898 lbs	T	T	T	+	+
Fun Centers™	FC12-705	Design #3	$ 16,988	844 lbs	T	T	T	+	+
Fun Centers™	FC12-706	Design #4	$ 20,698	1052 lbs	T	T	T	+	+
Fun Centers™	FC12-707	Design #4	$ 20,610	998 lbs	T	T	T	+	+
Fun Centers™	FC12-708	Design #5	$ 22,476	1437 lbs	T	T	T	+	+
Fun Centers™	FC12-709	Design #5	$ 22,300	1329 lbs	T	T	T	+	+
Fun Centers™	FC12-710	Design #6	$ 26,294	1528 lbs	T	T	T	+	+
Fun Centers™	FC12-711	Design #6	$ 26,118	1420 lbs	T	T	T	+	+
Fun Centers™	FC12-712	Design #7	$ 35,483	2092 lbs	T	T	T	+	+
Fun Centers™	FC12-713	Design #7	$ 35,219	1930 lbs	T	T	T	+	+
Fun Centers™	FC12-714	Design #8	$ 41,861	2317 lbs	T	T	T	+	+
Fun Centers™	FC12-715	Design #8	$ 41,597	2155 lbs	T	T	T	+	+
Inclusive	IDEA-2300	Suburbia	$ 192,543	7877 lbs	T	T	T	T	F
Inclusive	IDEA-2301	Peacock Plaza	$ 283,503	15686 lbs	T	T	T	+	F
Inclusive	IDEA-2302	Go-Getter Garden	$ 353,678	15946 lbs	T	T	T	T	F
infiNET™	INET-1700	INET-1700	$ 13,173	608 lbs	T	T	T	T	T
infiNET™	INET-1705	INET-1705	$ 37,442	1863 lbs	T	T	T	+	+
infiNET™	INET-1710	INET-1710	$ 52,714	2764 lbs	T	T	T	+	+
infiNET™	INET-1715	INET-1715	$ 63,663	3587 lbs	T	T	T	+	+
infiNET™	INET-1720	INET-1720	$ 65,549	3111 lbs	T	T	T	T	T
infiNET™	INET-1725	INET-1725	$ 91,729	5016 lbs	T	T	T	+	+
infiNET™	INET-1735	INET-1735	$ 137,538	6820 lbs	T	T	T	+	F
infiNET™	INET-1800	INET-1800	$ 68,820	3059 lbs	T	T	T	T	T
infiNET™	INET-1805	INET-1805	$ 106,599	4971 lbs	T	T	T	T	T
infiNET™	INET-1810	INET-1810	$ 58,671	2499 lbs	T	T	T	T	T
infiNET™	INET-2000	INET-2000	$ 78,429	3893 lbs	T	T	T	+	F
infiNET™	INET-2005	INET-2005	$ 85,507	5336 lbs	T	T	T	+	T
infiNET™	INET-2010	INET-2010	$ 94,085	5441 lbs	T	T	T	+	F
infiNET™	INET-2200	INET-2200	$ 120,010	5693 lbs	T	T	T	+	F
infiNET™	INET-2205	INET-2205	$ 126,234	6902 lbs	T	T	T	T	F
infiNET™	INET-2210	INET-2210	$ 130,320	7188 lbs	T	T	T	+	F
ModPods™	MOD-181	MOD-181	$ 7,875	583 lbs	T	T	T	T	T
ModPods™	MOD-182	MOD-182	$ 16,980	1195 lbs	T	T	T	T	T
ModPods™	MOD-183	MOD-183	$ 24,414	1774 lbs	T	T	T	T	T
ModPods™	MOD-190	MOD-190	$ 8,020	516 lbs	T	T	T	T	T
ModPods™	MOD-191	MOD-191	$ 12,547	908 lbs	T	T	T	T	T
ModPods™	MOD-192	MOD-192	$ 23,480	1810 lbs	T	T	T	T	T
ModPods™	MOD-193	MOD-193	$ 25,522	1839 lbs	T	T	T	T	T
ModPods™	MOD-194	MOD-194	$ 27,705	2010 lbs	T	T	T	T	T
ModPods™	MOD-195	MOD-195	$ 40,247	2889 lbs	T	T	T	T	T
ModPods™	MOD-196	MOD-196	$ 11,649	813 lbs	T	T	T	T	T
ModPods™	MOD-197	MOD-197	$ 15,732	989 lbs	T	T	T	T	T
ModPods™	MOD-198	MOD-198	$ 18,526	1284 lbs	T	T	T	T	T
ModPods™	MOD-199	MOD-199	$ 27,741	1827 lbs	T	T	T	T	T
Play Fundamentals	FUN-1480	Playhouse	$ 10,738	460 lbs	T	T	T	T	T
Play Fundamentals	FUN-1489	Metro Station	$ 50,074	2622 lbs	T	T	T	F	F
PlayCubes®	PLAYCUBES-1	1.0	$ 4,069	153 lbs	T	T	T	T	T
PlayCubes®	PLAYCUBES-1.1C	1.1C	$ 8,598	362 lbs	T	T	T	T	T
PlayCubes®	PLAYCUBES-10	10.0	$ 38,331	1269 lbs	T	T	T	T	+

PlayCubes®	PLAYCUBES-10.1CSL	10.1CSL	$ 60,089	2538 lbs	T	T	T	T	F
PlayCubes®	PLAYCUBES-10CSL	10.0CSL	$ 55,987	2042 lbs	T	T	T	T	+
PlayCubes®	PLAYCUBES-10M	10.0M	$ 72,810	2962 lbs	T	T	T	T	T
PlayCubes®	PLAYCUBES-12SL	12.0SL	$ 60,612	2531 lbs	T	T	T	T	F
PlayCubes®	PLAYCUBES-13SL	13.0SL	$ 63,808	2069 lbs	T	T	T	T	F
PlayCubes®	PLAYCUBES-1M	1.0M	$ 7,906	335 lbs	T	T	T	T	T
PlayCubes®	PLAYCUBES-1MC	1.0MC	$ 9,727	385 lbs	T	T	T	T	T
PlayCubes®	PLAYCUBES-27	27.0	$ 102,551	3308 lbs	T	T	T	T	F
PlayCubes®	PLAYCUBES-2MC	2.0MC	$ 19,452	802 lbs	T	T	T	T	T
PlayCubes®	PLAYCUBES-3MN	3.0MN	$ 28,250	152 lbs	T	T	T	T	T
PlayCubes®	PLAYCUBES-3N	3.0N	$ 16,739	607 lbs	T	T	T	T	T
PlayCubes®	PLAYCUBES-4	4.0	$ 15,766	556 lbs	T	T	T	T	+
PlayCubes®	PLAYCUBES-4C	4.0C	$ 19,732	728 lbs	T	T	T	T	+
PlayCubes®	PLAYCUBES-4M	4.0M	$ 29,844	1242 lbs	T	T	T	T	T
PlayCubes®	PLAYCUBES-5MCN	5.0MCN	$ 48,309	1969 lbs	T	T	T	T	T
PlayCubes®	PLAYCUBES-7	7.0	$ 26,431	851 lbs	T	T	T	T	+
PlayCubes®	PLAYCUBES-7M	7.0M	$ 50,319	2031 lbs	T	T	T	T	T
PlayCubes®	PLAYCUBES-8SL	8.0SL	$ 38,141	1260 lbs	T	T	T	T	+
PlayCubes®	PLAYCUBES-8SLM	8.0SLM	$ 72,340	2702 lbs	T	T	T	T	T
PlayForm 7®	PLAYFORM7-B	Laminated Bamboo	$ 126,678	2624 lbs	T	T	T	T	T
PlayForm 7®	PLAYFORM7-B-SM	Laminated Bamboo (Surf Mnt)	$ 126,678	2215 lbs	T	T	T	T	T
PlayForm 7®	PLAYFORM7-H	Sheet Plastic	$ 126,678	2656 lbs	T	T	T	T	T
PlayForm 7®	PLAYFORM7-H-SM	Sheet Plastic (Surf Mnt)	$ 126,678	2248 lbs	T	T	T	T	T
PlayForm 7®	PLAYFORM7-P	Polycarbonate	$ 126,678	2638 lbs	T	T	T	T	T
PlayForm 7®	PLAYFORM7-P-SM	Polycarbonate (Surf Mnt)	$ 126,678	2229 lbs	T	T	T	T	T
Playmakers®	500-1719	Superhero	$ 34,600	2670 lbs	T	T	T	+	+
Playmakers®	500-1735	Monkey Business	$ 64,111	4197 lbs	T	T	T	T	F
Playmakers®	500-1803	Detour	$ 74,364	5118 lbs	T	T	T	+	+
Playmakers®	500-1839	500-1839	$ 52,541	3320 lbs	T	T	T	+	F
Playmakers®	500-1841	500-1841	$ 57,544	3778 lbs	T	T	T	+	F
Playmakers®	500-1910	Sojourn	$ 83,948	4041 lbs	T	T	T	+	F
Playmakers®	500-1911	Peak	$ 113,405	5579 lbs	T	T	T	+	F
Playmakers®	500-1912	Cubed	$ 134,144	5713 lbs	T	T	T	T	F
Playmakers®	500-1913	Walk-up	$ 63,268	3135 lbs	T	T	T	+	F
Playmakers®	500-2005	Claire's Climb	$ 74,458	3488 lbs	T	T	T	+	F
Playmakers®	500-2006	Aria's Retreat	$ 74,758	3589 lbs	T	T	T	T	F
Playmakers®	500-2009	Abigail's Maze	$ 127,464	4714 lbs	T	T	T	+	F
Playmakers®	500-2010	Rodney's Ropes	$ 164,803	5159 lbs	T	T	T	T	F
Playmakers®	500-2030	Cooper's Corner	$ 46,877	2379 lbs	T	T	T	+	+
Playmakers®	500-2031	Nola's Place	$ 58,081	3464 lbs	T	T	T	+	+
Playmakers®	500-2032	Raelyn's Oasis	$ 70,491	3902 lbs	T	T	T	+	+
Playmakers®	500-2033	Monkeying Around	$ 80,349	3845 lbs	T	T	T	T	T
Playmakers®	500-2034	Evie's Adventure	$ 80,179	3942 lbs	T	T	T	+	F
Playmakers®	500-2035	Lydia's Rainbow	$ 104,197	5358 lbs	T	T	T	+	F
Playmakers®	500-2081	500-2081	$ 95,844	6041 lbs	T	T	T	+	F
Playmakers®	500-2109	Lily's Prism	$ 64,059	3993 lbs	T	T	T	+	F
Playmakers®	500-2110	Chutes and Cubes	$ 78,969	4080 lbs	T	T	T	+	F
Playmakers®	500-2111	Sylvan Slides	$ 78,466	4498 lbs	T	T	T	+	F
Playmakers®	500-2112	Cubes of Denali	$ 95,224	4588 lbs	T	T	T	+	F
Playmakers®	500-2114	Craig's Quest	$ 125,472	7818 lbs	T	T	T	+	F
Playmakers®	500-2174	500-2174	$ 37,738	2564 lbs	T	T	T	+	F
Playmakers®	500-2176	500-2176	$ 42,404	2613 lbs	T	T	T	+	F
Playmakers®	500-2177	500-2177	$ 34,217	2367 lbs	T	T	T	+	F

Playmakers®	500-2187	500-2187	$ 53,888	3342 lbs	T	T	T	+	F
Playmakers®	500-2188	Dynamic Rays	$ 87,851	5851 lbs	T	T	T	+	F
Playmakers®	500-2205	Cubic Knot	$ 73,636	3700 lbs	T	T	T	+	F
Playmakers®	500-2206	Imagination Station	$ 193,473	11529 lbs	T	T	T	+	F
Playmakers®	500-2267	500-2267	$ 46,150	3027 lbs	T	T	T	+	F
Playmakers®	500-2300	Monster Mash-Up	$ 47,271	3038 lbs	T	T	T	+	F
Playmakers®	500-2301	Mighty Monarch	$ 60,393	3790 lbs	T	T	T	+	F
Playmakers®	500-2303	Wavescape	$ 90,755	5983 lbs	T	T	T	+	F
Playmakers®	500-2305	FUNderstorm	$ 147,447	7869 lbs	T	T	T	+	F
Playmakers®	500-2306	Community Corner	$ 63,628	3794 lbs	T	T	T	T	F
Playmakers®	500-2307	500-2307	$ 30,759	2210 lbs	T	T	T	+	F
Playmakers®	500-2309	500-2309	$ 39,948	2680 lbs	T	T	T	+	F
Playmakers®	500-2400	500-2400	$ 59,402	3721 lbs	T	T	T	+	F
Playmakers®	500-2451	Valor Valley	$ 254,435	12969 lbs	T	T	T	T	F
PlaySimple®	PSD-1101	Mighty Fun Mountain	$ 10,900	851 lbs	T	T	T	+	T
PlaySimple®	PSD-1101-FTD	Mighty Fun Mountain	$ 11,720	931 lbs	T	T	T	+	T
PlaySimple®	PSD-1102	Tunnel Junction	$ 17,866	1353 lbs	T	T	T	+	T
PlaySimple®	PSD-1102-FTD	Tunnel Junction	$ 19,196	1480 lbs	T	T	T	+	T
PlaySimple®	PSD-1103	Rock-N-Slide	$ 17,874	1494 lbs	T	T	T	+	T
PlaySimple®	PSD-1103-FTD	Rock-N-Slide	$ 19,204	1621 lbs	T	T	T	+	T
PlaySimple®	PSD-1104	Mega Tunnel Junction	$ 24,840	1996 lbs	T	T	T	+	T
PlaySimple®	PSD-1104-FTD	Mega Tunnel Junction	$ 26,680	2171 lbs	T	T	T	+	T
PlaySimple®	PSD-1105	Eagle Summit	$ 27,757	2263 lbs	T	T	T	+	T
PlaySimple®	PSD-1105-FTD	Eagle Summit	$ 29,502	2443 lbs	T	T	T	+	T
PlaySimple®	PSD-1106	Lookout Point	$ 34,723	2765 lbs	T	T	T	+	T
PlaySimple®	PSD-1106-FTD	Lookout Point	$ 36,978	2992 lbs	T	T	T	+	T
PlaySimple®	PSD-1107	Simply Play	$ 8,250	686 lbs	T	T	T	+	T
PlaySimple®	PSD-1107-FTD	Simply Play	$ 9,550	757 lbs	T	T	T	+	T
PlaySimple®	PSD-1108	Mega Fun Station	$ 24,121	1885 lbs	T	T	T	+	F
PlaySimple®	PSD-1108-FTD	Mega Fun Station	$ 23,721	2055 lbs	T	T	T	+	T
PlayTown®	IDEA-2000	Riley's Rescue	$ 47,824	3114 lbs	T	T	T	T	T
PlayTown®	IDEA-2001	Butterfly Garden	$ 21,366	1274 lbs	T	T	T	T	T
PlayTown®	IDEA-2002	Emily's Playhouse	$ 30,243	1651 lbs	T	T	T	T	T
PlayTown®	IDEA-2003	Oscar's Farm	$ 38,679	2709 lbs	T	T	T	T	T
RockBlocks®	RB-1005	WonderFalls	$ 19,036	798 lbs	T	T	T	+	F
RockBlocks®	RB-1015	Adventure Canyon	$ 35,223	1414 lbs	T	T	T	+	F
RockBlocks®	RB-1200	Rocky Ridge	$ 12,294	459 lbs	T	T	T	T	T
RockBlocks®	RB-305	Corner Rock	$ 7,017	298 lbs	T	T	T	T	T
RockBlocks®	RB-310	Around the Bend	$ 12,192	493 lbs	T	T	T	T	T
RockBlocks®	RB-315	Hairpin Turn	$ 20,098	813 lbs	T	T	T	T	T
RopeScapes™	RS-2300	RS-2300	$ 47,545	2335 lbs	T	T	T	T	F
RopeScapes™	RS-2305	RS-2305	$ 48,235	2069 lbs	T	T	T	T	F
RopeScapes™	RS-2310	RS-2310	$ 88,899	3816 lbs	T	T	T	T	F
RopeScapes™	RS-2315	RS-2315	$ 89,049	4918 lbs	T	T	T	T	F
RopeScapes™	RS-2320	RS-2320	$ 89,987	5203 lbs	T	T	T	T	F
RopeScapes™	RS-2325	RS-2325	$ 91,641	4252 lbs	T	T	T	T	F
RopeScapes™	RS-2330	RS-2330	$ 93,567	4356 lbs	T	T	T	T	F
RopeScapes™	RS-2335	RS-2335	$ 110,519	5015 lbs	T	T	T	T	F
RopeScapes™	RS-2340	RS-2340	$ 128,442	5783 lbs	T	T	T	T	F
RopeScapes™	RS-2345	RS-2345	$ 133,458	5865 lbs	T	T	T	T	F
RopeScapes™	RS-2350	RS-2350	$ 139,978	7467 lbs	T	T	T	T	F
RopeScapes™	RS-2355	RS-2355	$ 151,405	6888 lbs	T	T	T	T	F
RopeScapes™	RS-2360	RS-2360	$ 169,339	8611 lbs	T	T	T	T	F

RopeScapes™	RS-2365	RS-2365	$ 188,845	8533 lbs	T	T	T	T	F
RopeScapes™	RS-2370	RS-2370	$ 205,738	10294 lbs	T	T	T	T	F
Sky Towers®	500-2036	Crimson Sky	$ 175,519	8232 lbs	T	T	T	+	F
Sky Towers®	500-2037	Emerson Heights	$ 242,035	11311 lbs	T	T	T	+	F
Sky Towers®	500-2038	Hannah's Hideaway	$ 242,001	11554 lbs	T	T	T	+	F
Sky Towers®	500-2039	Jude's Tower	$ 279,844	13621 lbs	T	T	T	+	F
Sky Towers®	500-2115	Toula's Tower	$ 217,078	12029 lbs	T	T	T	+	F
Tianzi™	TZ-2300	TZ-2300	$ 11,731	660 lbs	T	T	T	T	F
Tianzi™	TZ-2305	TZ-2305	$ 19,507	1120 lbs	T	T	T	T	F
Tianzi™	TZ-2310	TZ-2310	$ 34,759	2033 lbs	T	T	T	T	F
Tianzi™	TZ-2315	TZ-2315	$ 57,005	3452 lbs	T	T	T	T	F
Tianzi™	TZ-2320	TZ-2320	$ 58,102	3054 lbs	T	T	T	T	F
Tianzi™	TZ-2325	TZ-2325	$ 100,925	5911 lbs	T	T	T	T	F
Unity® Connect	UC-1700	UC-1700	$ 20,710	892 lbs	T	T	T	T	T
Unity® Connect	UC-1705	UC-1705	$ 22,438	967 lbs	T	T	T	T	T
Unity® Connect	UC-1710	UC-1710	$ 27,280	1433 lbs	T	T	T	T	T
Unity® Connect	UC-1715	UC-1715	$ 27,197	1151 lbs	T	T	T	T	T
Unity® Connect	UC-1720	UC-1720	$ 31,336	1540 lbs	T	T	T	T	T
Unity® Connect	UC-1725	UC-1725	$ 35,346	1594 lbs	T	T	T	T	T
Unity® Connect	UC-1730	UC-1730	$ 58,793	2681 lbs	T	T	T	T	T
Unity® Connect	UC-1735	UC-1735	$ 54,077	2278 lbs	T	T	T	T	T
Unity® Connect	UC-1740	UC-1740	$ 56,056	2486 lbs	T	T	T	T	T
Unity® Connect	UC-1745	UC-1745	$ 61,262	2482 lbs	T	T	T	T	T
Unity® Connect	UC-1750	UC-1750	$ 95,129	4433 lbs	T	T	T	T	T
Unity® Connect	UC-1755	UC-1755	$ 86,357	3924 lbs	T	T	T	T	T
Unity® Connect	UC-1900	UC-1900	$ 39,942	1824 lbs	T	T	T	T	T
Unity® Connect	UC-2000	UC-2000	$ 32,461	1611 lbs	T	T	T	T	T
Unity® Connect	UC-2005	UC-2005	$ 34,967	1634 lbs	T	T	T	T	T
Unity® Connect	UC-2010	UC-2010	$ 35,743	1398 lbs	T	T	T	T	T
Unity® Connect	UC-2015	UC-2015	$ 42,398	1626 lbs	T	T	T	T	T
Unity® Connect	UC-2020	UC-2020	$ 48,720	2057 lbs	T	T	T	T	T
Unity® Connect	UC-2025	UC-2025	$ 67,917	2709 lbs	T	T	T	T	T
Unity® Connect	UC-2105	UC-2105	$ 57,980	2695 lbs	T	T	T	T	T
	CB-1300	Boulder Hill Slide	$ 11,468	1211 lbs	T	T	T	T	T
	IDEA-1702	Westward Ho	$ 41,338	2388 lbs	T	T	T	+	+
	IDEA-1800	Campground	$ 42,842	5158 lbs	T	T	T	T	T

Category	Part Number	DESCRIPTION	List Price ($ USD)	Weight (lbs)	ASTM Certified	CPSC Compliant	CSA Certified	EN Certified
Bambino	ZZAC0030	BAMBINO A-FRAME	$ 16,899	1061.23	T	T	T	T
Bambino	ZZAC0030S	BAMBINO A-FRAME (SM)	$ 16,899	976.41	T	T	T	T
Bambino	ZZAC0031	BAMBINO ARCH - BEE HIVE	$ 3,283	194.17	T	T	T	T
Bambino	ZZAC0031S	BAMBINO ARCH - BEE HIVE (SM)	$ 3,283	166.81	T	T	T	T
Bambino	ZZAC0032	BAMBINO ARCH - STEPPING STONES	$ 3,265	138.67	T	T	T	T
Bambino	ZZAC0032S	BAMBINO ARCH - STEPPING STONES (SM)	$ 3,265	114.83	T	T	T	T
Bambino	ZZAC0033	BAMBINO ARCH - COCOON	$ 3,450	217.67	T	T	F	T
Bambino	ZZAC0033S	BAMBINO ARCH - COCOON (SM)	$ 3,450	193.06	T	T	F	T
Bambino	ZZAC0034	BAMBINO ARCH - BASKET SWAY	$ 3,254	154.19	T	T	T	T
Bambino	ZZAC0034S	BAMBINO ARCH - BASKET SWAY (SM)	$ 3,254	118.14	T	T	T	T
Bambino	ZZAC0035	OUTRIGGERS FOR PANELS	$ 1,450	83.04	T	T	T	T
Bambino	ZZAC0035S	OUTRIGGERS FOR PANELS (SM)	$ 1,450	64.00	T	T	T	T
Bambino	ZZAC0036	BAMBINO RAINBOW WINDOW PANEL	$ 1,403	28.11	T	T	T	T
Bambino	ZZAC0037	BAMBINO BELL PANEL	$ 1,407	35.81	T	T	T	T
Bambino	ZZAC0038	BAMBINO DRUM PANEL	$ 1,403	36.35	T	T	T	T
Bambino	ZZAC0039	BAMBINO TACTILE PANEL	$ 1,391	26.93	T	T	T	T
Bambino	ZZAC0040	BAMBINO CAR RACE PANEL	$ 1,403	28.03	T	T	T	T
Bambino	ZZAC0041	BAMBINO COUNTING PANEL	$ 1,407	33.31	T	T	T	T
Bambino	ZZAC0042	BAMBINO MOVE-IT PANEL	$ 1,407	37.72	T	T	T	T
Bambino	ZZAC0043	BAMBINO JUMBLE PANEL	$ 1,383	41.53	T	T	T	T
Bambino	ZZAC0044	BAMBINO (EN) - FINGER ENTRAP. PREVENTION KIT	$ 55	0.62	F	F	F	F

Category	Part Number	DESCRIPTION	List Price ($ USD)	Weight (lbs)	ASTM Certified	CPSC Compliant	CSA Certified	EN Certified
UnityConnect	ZZAC0100	UNITY CONNECT - A-FRAME W/ SINGLE HOOP (MDL/DBL ARCH)	$ 5,318	389.24	T	T	T	T
UnityConnect	ZZAC0100S	UNITY CONNECT - A-FRAME W/ SINGLE HOOP (MDL/DBL ARCH) (SURFACE MOUNT)	$ 5,318	310.44	T	T	T	T
UnityConnect	ZZAC0101	UNITY CONNECT - A-FRAME W/ SINGLE HOOP (DBL ARCH/DBL ARCH)	$ 5,700	392.10	T	T	T	T
UnityConnect	ZZAC0101S	UNITY CONNECT - A-FRAME W/ SINGLE HOOP (DBL ARCH/DBL ARCH) (SURFACE MOUNT)	$ 5,700	313.30	T	T	T	T
UnityConnect	ZZAC0102	UNITY CONNECT - A-FRAME W/ TRIPLE HOOP (MDL/DBL ARCH)	$ 6,962	432.85	T	T	T	T
UnityConnect	ZZAC0102S	UNITY CONNECT - A-FRAME W/ TRIPLE HOOP (MDL/DBL ARCH) (SURFACE MOUNT)	$ 6,962	353.47	T	T	T	T
UnityConnect	ZZAC0103	UNITY CONNECT - A-FRAME W/ TRIPLE HOOP (DBL ARCH/DBL ARCH)	$ 7,596	435.72	T	T	T	T
UnityConnect	ZZAC0103S	UNITY CONNECT - A-FRAME W/ TRIPLE HOOP (DBL ARCH/DBL ARCH) (SURFACE MOUNT)	$ 7,596	356.34	T	T	T	T
UnityConnect	ZZAC0104	UNITY CONNECT - A-FRAME W/ ZAG ROPES (MDL/DBL ARCH)	$ 4,921	374.11	T	T	T	T
UnityConnect	ZZAC0104S	UNITY CONNECT - A-FRAME W/ ZAG ROPES (MDL/DBL ARCH) (SURFACE MOUNT)	$ 4,921	295.31	T	T	T	T
UnityConnect	ZZAC0105	UNITY CONNECT - A-FRAME W/ ZAG ROPES (DBL ARCH/DBL ARCH)	$ 5,350	376.98	T	T	T	T
UnityConnect	ZZAC0105S	UNITY CONNECT - A-FRAME W/ ZAG ROPES (DBL ARCH/DBL ARCH) (SURFACE MOUNT)	$ 5,350	298.18	T	T	T	T
UnityConnect	ZZAC0106	UNITY CONNECT - A-FRAME BARE (MDL/DBL ARCH)	$ 3,741	345.93	T	T	T	T
UnityConnect	ZZAC0106S	UNITY CONNECT - A-FRAME BARE (MDL/DBL ARCH) (SURFACE MOUNT)	$ 3,741	275.03	T	T	T	T
UnityConnect	ZZAC0107	UNITY CONNECT - A-FRAME BARE (DBL ARCH/DBL ARCH)	$ 3,952	348.82	T	T	T	T
UnityConnect	ZZAC0107S	UNITY CONNECT - A-FRAME BARE (DBL ARCH/DBL ARCH) (SURFACE MOUNT)	$ 3,952	277.92	T	T	T	T
UnityConnect	ZZAC0109	UNITY CONNECT - A FRAME W/ DECK (DOUBLE ARCH)	$ 14,032	810.04	T	T	T	T
UnityConnect	ZZAC0109S	UNITY CONNECT - A FRAME W/ DECK (DOUBLE ARCH) (SURFACE MOUNT)	$ 14,032	703.67	T	T	T	T
UnityConnect	ZZAC0110	UNITY CONNECT - A FRAME W/ DECK (MDL CONNECTION)	$ 13,933	807.23	T	T	T	T
UnityConnect	ZZAC0110S	UNITY CONNECT - A FRAME W/ DECK (MDL CONNECTION) (SURFACE MOUNT)	$ 13,933	700.87	T	T	T	T
UnityConnect	ZZAC0200	UNITY CONNECT - QUIVER	$ 8,670	280.66	T	T	T	T
UnityConnect	ZZAC0200S	UNITY CONNECT - QUIVER (SURFACE MOUNT)	$ 8,670	252.14	T	T	T	T
UnityConnect	ZZAC0201	UNITY CONNECT - HANGING BASKETS	$ 20,300	697.27	T	T	T	T
UnityConnect	ZZAC0201S	UNITY CONNECT - HANGING BASKETS (SURFACE MOUNT)	$ 20,300	631.18	T	T	T	T
UnityConnect	ZZAC0300	UNITY CONNECT - TREMBLER	$ 5,886	184.75	T	T	T	T
UnityConnect	ZZAC0300S	UNITY CONNECT - TREMBLER (SURFACE MOUNT)	$ 5,886	178.07	T	T	T	T
UnityConnect	ZZAC0302	UNITY CONNECT - HOOP SHAKERS	$ 4,418	184.11	T	T	T	T
UnityConnect	ZZAC0302S	UNITY CONNECT - HOOP SHAKERS (SURFACE MOUNT)	$ 4,418	200.06	T	T	T	T
UnityConnect	ZZAC0304	UNITY CONNECT - TWIRL (LEFT)	$ 4,418	176.78	T	T	T	T
UnityConnect	ZZAC0304S	UNITY CONNECT - TWIRL (LEFT) (SURFACE MOUNT)	$ 4,418	163.48	T	T	T	T
UnityConnect	ZZAC0305	UNITY CONNECT - TWIRL (RIGHT)	$ 4,418	176.78	T	T	T	T
UnityConnect	ZZAC0305S	UNITY CONNECT - TWIRL (RIGHT) (SURFACE MOUNT)	$ 4,418	163.48	T	T	T	T
UnityConnect	ZZAC0306	UNITY CONNECT - TAILSPIN (LEFT)	$ 2,944	127.15	T	T	T	T
UnityConnect	ZZAC0306S	UNITY CONNECT - TAILSPIN (LEFT) (SURFACE MOUNT)	$ 2,944	113.85	T	T	T	T
UnityConnect	ZZAC0307	UNITY CONNECT - TAILSPIN (RIGHT)	$ 2,944	127.15	T	T	T	T
UnityConnect	ZZAC0307S	UNITY CONNECT - TAILSPIN (RIGHT) (SURFACE MOUNT)	$ 2,944	113.85	T	T	T	T
UnityConnect	ZZAC0308	UNITY CONNECT - HOOP NET (LEFT END)	$ 9,599	354.48	T	T	T	T
UnityConnect	ZZAC0308S	UNITY CONNECT - HOOP NET (LEFT END) (SURFACE MOUNT)	$ 9,599	297.38	T	T	T	T
UnityConnect	ZZAC0309	UNITY CONNECT - HOOP NET (RIGHT END)	$ 9,599	354.48	T	T	T	T
UnityConnect	ZZAC0309S	UNITY CONNECT - HOOP NET (RIGHT END) (SURFACE MOUNT)	$ 9,599	297.38	T	T	T	T
UnityConnect	ZZAC0310	UNITY CONNECT - FLEX TIERS	$ 7,480	189.56	T	T	T	T
UnityConnect	ZZAC0310S	UNITY CONNECT - FLEX TIERS (SURFACE MOUNT)	$ 7,480	185.49	T	T	T	T
UnityConnect	ZZAC0312	UNITY CONNECT - PORTAL W/ BALANCE	$ 6,530	202.94	T	T	T	T
UnityConnect	ZZAC0312S	UNITY CONNECT - PORTAL W/ BALANCE (SURFACE MOUNT)	$ 6,530	158.05	T	T	T	T
UnityConnect	ZZAC0400	UNITY CONNECT - PLUNGE SLIDE	$ 3,075	178.86	T	T	T	T
UnityConnect	ZZAC0400S	UNITY CONNECT - PLUNGE SLIDE (SURFACE MOUNT)	$ 3,075	177.32	T	T	T	T
UnityConnect	ZZAC0401	UNITY CONNECT - ZIPSTIX	$ 1,950	109.76	T	T	T	T
UnityConnect	ZZAC0401S	UNITY CONNECT - ZIPSTIX (SURFACE MOUNT)	$ 1,950	119.88	T	T	T	T
UnityConnect	ZZAC0402	UNITY CONNECT - SLIDING POLE	$ 1,830	105.93	T	T	T	T
UnityConnect	ZZAC0402S	UNITY CONNECT - SLIDING POLE (SURFACE MOUNT)	$ 1,830	107.84	T	T	T	T
UnityConnect	ZZAC0403	UNITY CONNECT - DROP ZONE ENTRY	$ 2,064	76.66	T	T	T	T
UnityConnect	ZZAC0404	UNITY CONNECT - NETCLINE	$ 3,315	99.95	T	T	T	T
UnityConnect	ZZAC0404S	UNITY CONNECT - NETCLINE (SURFACE MOUNT)	$ 3,315	28.72	T	T	T	T
UnityConnect	ZZAC0405	UNITY CONNECT - CLIMB-A-BOARD	$ 5,755	264.99	T	T	T	T
UnityConnect	ZZAC0405S	UNITY CONNECT - CLIMB-A-BOARD (SURFACE MOUNT)	$ 5,755	255.45	T	T	T	T
UnityConnect	ZZAC0406	UNITY CONNECT - STAINLESS STEEL SLIDE	$ 13,012	195.65	T	T	T	T
UnityConnect	ZZAC0406S	UNITY CONNECT - STAINLESS STEEL SLIDE (SM)	$ 13,012	186.15	T	T	T	T

Category	Part Number	DESCRIPTION	List Price ($ USD)	Weight (lbs)	ASTM Certified	CPSC Compliant	CSA Certified	EN Certified
Swings	ZZXX0126	2-3/8IN SWING HANGER W/ HARDWARE	$ 120	3.11	T	T	T	T
Swings	ZZXX0127	3.5IN SWING HANGER W/ HARDWARE	$ 130	4.67	T	T	T	T
Swings	ZZXX0134	4/0 STRAIGHT LINK SWING CHAIN SILVER SHIELD (FOOT)	$ 17	0.40	T	T	T	F
Swings	ZZXX0161	5.0IN SWING HANGER W/ HARDWARE	$ 162	2.50	T	T	T	T
Swings	ZZXX0217	SWING HANGER OD WRAP	$ 61	0.03	T	T	T	T
Swings	ZZXX0218	ARCH SWING - HOOPLA SEAT	$ 1,175	46.61	T	T	T	T
Swings	ZZXX0219	ARCH SWING - ROPE BASKET SEAT	$ 2,500	85.80	T	T	T	T
Swings	ZZXX0260	BELT SEAT W/SILVER SHIELD CHAIN FOR 8ft TOP RAIL	$ 170	8.80	T	T	T	F
Swings	ZZXX0261	BELT SEAT W/SILVER SHIELD 10ft TOP RAIL	$ 200	10.60	T	T	T	F
Swings	ZZXX0265	INFANT SEAT W/SILVER SHIELD FOR 8ft TOP RAIL	$ 295	11.31	T	T	T	F
Swings	ZZXX0266	INFANT SEAT W/SILVER SHIELD FOR 10ft TOP RAIL	$ 295	12.91	T	T	T	F
Swings	ZZXX0303	5in OD ALUMINUM ARCH TIRE SWING w/GALV CHAIN ADD-A-BAY	$ 3,763	198.55	T	T	T	F
Swings	ZZXX0311	BELT SEAT W/ STAINLESS CHAIN TO 8ft TOP RAIL	$ 1,404	33.65	T	T	T	T
Swings	ZZXX0312	BELT SEAT W/ STAINLESS CHAIN TO 10ft TOP RAIL	$ 1,780	36.85	T	T	T	F
Swings	ZZXX0313	REINFORCED RUBBER SWING W/ STAINLESS CHAIN- 8FT TOP RAIL	$ 1,616	15.50	T	T	T	T
Swings	ZZXX0314	REINFORCED RUBBER SWING W/ STAINLESS CHAIN- 10FT TOP RAIL	$ 1,994	18.50	T	T	T	F
Swings	ZZXX0317	INFANT SWING W/ STAINLESS CHAIN FOR 8ft TOP RAIL	$ 1,295	13.78	T	T	T	T
Swings	ZZXX0318	INFANT SWING W/ STAINLESS CHAIN FOR 10ft TOP RAIL	$ 1,583	17.38	T	T	T	T
Swings	ZZXX0324	BELT SEAT w/SILVER SHIELD TO 7ft TOP RAIL	$ 170	8.00	T	T	T	F
Swings	ZZXX0325	INFANT SEAT w/SILVER SHIELD TO 7ft TOP RAIL	$ 295	10.29	T	T	T	F
Swings	ZZXX0329	BELT SEAT w/ISO 43 CHAIN TO 7ft TOP RAIL	$ 283	10.64	T	T	T	T
Swings	ZZXX0330	BELT SEAT w/ISO 43 CHAIN TO 8ft TOP RAIL	$ 283	12.38	T	T	T	T
Swings	ZZXX0331	BELT SEAT w/ISO 43 CHAIN TO 10ft TOP RAIL	$ 283	15.60	T	T	T	T
Swings	ZZXX0332	INFANT SEAT w/ISO 43 CHAIN TO 7ft TOP RAIL	$ 378	12.56	T	T	T	T
Swings	ZZXX0333	INFANT SWING w/ISO 43 CHAIN TO 8ft TOP RAIL	$ 393	14.04	T	T	T	T
Swings	ZZXX0334	INFANT SWING w/ISO 43 CHAIN TO 10ft TOP RAIL	$ 444	17.38	T	T	T	T
Swings	ZZXX0635	SWING ALONG SEAT TO 8ft TOP RAIL	$ 1,254	31.84	T	T	T	F
Swings	ZZXX0642	SWING ALONG W/ SS CHAINS FOR 8FT TOP RAIL	$ 1,699	25.89	T	T	T	T
Swings	ZZXX0818	8ft SINGLE POST SWING ASSEMBLY	$ 1,637	257.68	T	T	T	T
Swings	ZZXX0819	8ft SINGLE POST SWING ADD-A-BAY	$ 1,125	169.58	T	T	T	T
Swings	ZZXX0820	TODDLER SWING ADD-ON BEAM	$ 1,037	56.97	T	T	T	T
Swings	ZZXX0822	7ft EARLY CHILDHOOD T-SWING	$ 2,147	243.25	T	T	T	T
Swings	ZZXX0823	8ft 2-UNIT STANDARD DUTY SWING	$ 1,485	202.27	T	T	T	T
Swings	ZZXX0824	8ft STANDARD DUTY SWING- ADD-A-BAY	$ 1,037	124.44	T	T	T	T
Swings	ZZXX0825	10ft 2-UNIT STANDARD DUTY SWING	$ 1,524	221.05	T	T	T	T
Swings	ZZXX0827	10ft STANDARD DUTY SWING- ADD-A-BAY	$ 1,070	134.09	T	T	T	T
Swings	ZZXX0828	8ft 2-UNIT HEAVY DUTY SWING	$ 2,125	320.32	T	T	T	T
Swings	ZZXX0829	8ft HEAVY DUTY SWING- ADD-A-BAY	$ 1,310	158.83	T	T	T	T
Swings	ZZXX0830	10ft 2-UNIT HEAVY DUTY SWING	$ 2,358	348.52	T	T	T	T
Swings	ZZXX0831	10ft HEAVY DUTY SWING- ADD-A-BAY	$ 1,397	168.23	T	T	T	T
Swings	ZZXX0835	8ft 2-UNIT ANTI-WRAP STANDARD SWING	$ 2,697	203.24	T	T	T	T
Swings	ZZXX0836	8ft 2-UNIT ANTI-WRAP SWING- ADD-A-BAY	$ 2,322	125.55	T	T	T	T
Swings	ZZXX0837	10ft 2-UNIT ANTI-WRAP STANDARD SWING	$ 2,839	222.06	T	T	T	T
Swings	ZZXX0838	10ft 2-UNIT ANTI-WRAP SWING- ADD-A-BAY	$ 2,365	134.67	T	T	T	T
Swings	ZZXX0850	SWING CLEVIS MAINTENANCE KIT	$ 33	0.54	T	T	T	T
Swings	ZZXX0891	ACCESSIBLE SWING SEAT- 7ft TOP RAIL	$ 1,483	50.80	T	T	T	F
Swings	ZZXX0892	ACCESSIBLE SWING SEAT- 8ft TOP RAIL	$ 1,537	51.90	T	T	T	F
Swings	ZZXX0893	ACCESSIBLE SWING SEAT- 10ft TOP RAIL	$ 1,537	55.10	T	T	T	F
Swings	ZZXX0894	ACCESSIBLE SWING SEAT- 7ft TOP RAIL - EN	$ 1,798	56.40	F	F	F	T
Swings	ZZXX0895	ACCESSIBLE SWING SEAT- 8ft TOP RAIL - EN	$ 1,812	59.50	F	F	F	T
Swings	ZZXX0896	ACCESSIBLE SWING SEAT-10ft TOP RAIL - EN	$ 1,852	65.50	F	F	F	T
Swings	ZZXX0897	RACING SEAT REPLACEMENT LATCH WITH HARNESS	$ 261	3.9	T	T	T	F
Swings	ZZXX0930	3.5in OD 2-UNIT STEEL ARCH SWING- 8ft TOP RAIL	$ 2,659	314.50	T	T	T	T
Swings	ZZXX0930S	3.5in OD 2-UNIT STEEL ARCH SWING- 8ft TOP RAIL (SM)	$ 2,659	314.50	T	T	T	T
Swings	ZZXX0931	5in OD 2-UNIT STEEL ARCH SWING- 8ft TOP RAIL	$ 3,091	417.00	T	T	T	T
Swings	ZZXX0931S	5in OD 2-UNIT STEEL ARCH SWING- 8ft TOP RAIL (SM)	$ 3,091	383.50	T	T	T	T
Swings	ZZXX0932	3.5in OD STEEL ARCH SWING 2-UNIT ADD-A-BAY	$ 1,596	197.70	T	T	T	T
Swings	ZZXX0932S	3.5in OD STEEL ARCH SWING 2-UNIT ADD-A-BAY (SM)	$ 1,596	197.70	T	T	T	T
Swings	ZZXX0933	5in OD STEEL ARCH SWING 2-UNIT ADD-A-BAY	$ 2,028	249.30	T	T	T	T
Swings	ZZXX0933S	5in OD STEEL ARCH SWING 2-UNIT ADD-A-BAY (SM)	$ 2,028	232.50	T	T	T	T
Swings	ZZXX0934	3.5in OD SINGLE SEAT ARCH SWING- 8ft TOP RAIL	$ 2,392	286.50	T	T	T	T
Swings	ZZXX0934S	3.5in OD SINGLE SEAT ARCH SWING- 8ft TOP RAIL (SM)	$ 2,392	286.50	T	T	T	T
Swings	ZZXX0935	5in OD SINGLE SEAT ARCH SWING - 8ft TOP RAIL	$ 2,826	389.00	T	T	T	T
Swings	ZZXX0935S	5in OD SINGLE SEAT ARCH SWING - 8ft TOP RAIL (SM)	$ 2,826	355.60	T	T	T	T
Swings	ZZXX0936	3.5in OD STEEL ARCH SWING SINGLE UNIT- ADD-A-BAY	$ 1,497	169.70	T	T	T	T
Swings	ZZXX0936S	3.5in OD STEEL ARCH SWING SINGLE UNIT- ADD-A-BAY (SM)	$ 1,497	169.70	T	T	T	T
Swings	ZZXX0937	5in OD STEEL ARCH SWING SINGLE UNIT- ADD-A-BAY	$ 1,928	221.30	T	T	T	T
Swings	ZZXX0937S	5in OD STEEL ARCH SWING SINGLE UNIT- ADD-A-BAY (SM)	$ 1,928	204.60	T	T	T	T
Swings	ZZXX0938	3.5IN OD ARCH SWING (MULTI-USER)	$ 3,079	315.70	T	T	T	T
Swings	ZZXX0938S	3.5IN OD ARCH SWING (SM) (MULTI-USER)	$ 3,079	315.70	T	T	T	T
Swings	ZZXX0939	5IN OD ARCH SWING (MULTI-USER)	$ 3,200	418.20	T	T	T	T
Swings	ZZXX0939S	5IN OD ARCH SWING (SM) (MULTI-USER)	$ 3,200	384.70	T	T	T	T
Swings	ZZXX0940	3.5IN OD ARCH SWING ADD-A-BAY (MULTI USER)	$ 2,526	198.90	T	T	T	T
Swings	ZZXX0940S	3.5IN OD ARCH SWING ADD-A-BAY (SM) (MULTI USER)	$ 2,526	198.90	T	T	T	T
Swings	ZZXX0941	5IN OD ARCH SWING ADD-A-BAY (MULTI USER)	$ 2,608	250.50	T	T	T	T
Swings	ZZXX0941S	5IN OD ARCH SWING ADD-A-BAY (SM) (MULTI USER)	$ 2,108	233.80	T	T	T	T
Swings	ZZXX0942	3.5in OD 2-UNIT ARCH SWING- ANTI-WRAP	$ 3,423	333.00	T	T	T	T
Swings	ZZXX0942S	3.5in OD 2-UNIT ARCH SWING- ANTI-WRAP (SM)	$ 3,423	333.10	T	T	T	T
Swings	ZZXX0943	5in OD 2-UNIT ARCH SWING- ANTI-WRAP	$ 3,854	435.60	T	T	T	T
Swings	ZZXX0943S	5in OD 2-UNIT ARCH SWING- ANTI-WRAP (SM)	$ 3,854	402.20	T	T	T	T
Swings	ZZXX0944	3.5in OD 2-UNIT ARCH SWING- ANTI-WRAP - ADD-A-BAY	$ 2,392	216.40	T	T	T	T
Swings	ZZXX0944S	3.5in OD 2-UNIT ARCH SWING- ANTI-WRAP - ADD-A-BAY (SM)	$ 2,392	216.40	T	T	T	T
Swings	ZZXX0945	5in OD 2-UNIT ARCH SWING- ANTI-WRAP - ADD-A-BAY	$ 2,826	268.00	T	T	T	T
Swings	ZZXX0945S	5in OD 2-UNIT ARCH SWING- ANTI-WRAP - ADD-A-BAY (SM)	$ 2,826	251.20	T	T	T	T

Swings	ZZXX0946	3.5in OD SINGLE UNIT ARCH SWING- ANTI-WRAP	$ 2,858	295.90	T	T	T	T
Swings	ZZXX0946S	3.5in OD SINGLE UNIT ARCH SWING- ANTI-WRAP (SM)	$ 2,858	295.90	T	T	T	T
Swings	ZZXX0947	5in OD SINGLE UNIT ARCH SWING- ANTI-WRAP	$ 3,290	398.40	T	T	T	T
Swings	ZZXX0947S	5in OD SINGLE UNIT ARCH SWING- ANTI-WRAP (SM)	$ 3,290	364.90	T	T	T	T
Swings	ZZXX0948	3.5in OD SINGLE UNIT ARCH SWING- ANTI-WRAP - ADD-A-BAY	$ 1,796	179.10	T	T	T	T
Swings	ZZXX0948S	3.5in OD SINGLE UNIT ARCH SWING-ANTI-WRAP-ADD-A-BAY (SM)	$ 1,796	179.10	T	T	T	T
Swings	ZZXX0949	5in OD SINGLE UNIT ARCH SWING- ANTI-WRAP - ADD-A-BAY	$ 2,226	230.70	T	T	T	T
Swings	ZZXX0949S	5in OD SINGLE UNIT ARCH SWING-ANTI-WRAP-ADD-A-BAY (SM)	$ 2,226	213.90	T	T	T	T
Swings	ZZXX0950	5in ARCH TIRE SWING W/ 4/0 CHAIN	$ 4,826	508.40	T	T	T	F
Swings	ZZXX0950S	5in ARCH TIRE SWING W/ 4/0 CHAIN (SM)	$ 4,826	474.90	T	T	T	F
Swings	ZZXX0951	5in ARCH TIRE SWING ADD-A-BAY W/ 4/0 CHAIN	$ 3,130	340.70	T	T	T	F
Swings	ZZXX0951S	5in ARCH TIRE SWING ADD-A-BAY W/ 4/0 CHAIN (SM)	$ 3,130	323.90	T	T	T	F
Swings	ZZXX0952	5in ARCH TIRE SWING W/ ISO CHAIN	$ 4,925	512.90	T	T	T	F
Swings	ZZXX0952S	5in ARCH TIRE SWING W/ ISO CHAIN (SM)	$ 4,925	479.50	T	T	T	F
Swings	ZZXX0953	5in ARCH TIRE SWING ADD-A-BAY W/ ISO CHAIN	$ 3,195	345.30	T	T	T	F
Swings	ZZXX0953S	5in ARCH TIRE SWING ADD-A-BAY W/ ISO CHAIN (SM)	$ 3,195	328.50	T	T	T	F
Swings	ZZXX0954	8ft ANTI-WRAP HEAVY DUTY SWING	$ 2,708	338.30	T	T	T	F
Swings	ZZXX0955	8ft ANTI-WRAP HEAVY DUTY SWING - ADD-A-BAY	$ 1,758	176.8	T	T	T	F
Swings	ZZXX0956	10ft ANTI-WRAP HEAVY DUTY SWING	$ 2,911	366.5	T	T	T	F
Swings	ZZXX0957	10ft ANTI-WRAP HEAVY DUTY SWING- ADD-A-BAY	$ 1,830	186.2	T	T	T	F
Swings	ZZXX0961	5in OD 2-UNIT ARCH SWING SHADE (SINGLE)	$ 11,865	1430.00	T	T	T	F
Swings	ZZXX0962	5in OD 4-UNIT ARCH SWING SHADE (DOUBLE)	$ 14,696	2167.80	T	T	T	F
Swings	ZZXX0963	5in OD 6-UNIT ARCH SWING SHADE (TRIPLE)	$ 19,685	2900.60	T	T	T	F
Swings	ZZXX0965	2-UNIT ARCH SWING SHADE TOP RAIL	$ 500	73.50	T	T	T	F
Swings	ZZXX0966	ANTI-WRAP ARCH SWING SHADE TOP RAIL	$ 1,098	92.10	T	T	T	F
Swings	ZZXX0967	BASKET/HOOPLA ARCH SWING SHADE TOP RAIL	$ 800	74.60	T	T	T	F
Swings	ZZXX0976	SINGLE POST SWING (END POSTS)	$ 968	171.4	T	T	T	F
Swings	ZZXX0977	SINGLE POST SWING (ADD-A-BAY POST)	$ 468	88.8	T	T	T	F
Swings	ZZXX0978	SINGLE POST SWING (BELT/TOT BEAM)	$ 890	82.6	T	T	T	F
Swings	ZZXX0979	SINGLE POST SWING (ACCESSIBLE/TOT BEAM)	$ 900	86.4	T	T	T	F

Category	Item Number	DESCRIPTION	Qty Per	List Price ($ USD)	Weight (lbs)	ADA Cert	ASTM Cert	CPSC Comp	CSA Cert	EN Cert
Swings	**350-ARCH**	**3.5in Arch Swing 2-Seats**		**$ 2,999**	**299 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0930	3.5in OD 2-UNIT STEEL ARCH SWING- 8ft TOP RAIL	1	$ 2,659						
	ZZXX0260	BELT SEAT W/SILVER SHIELD CHAIN FOR 8ft TOP RAIL	2	$ 170						
Swings	**350-ARCH-ADD**	**3.5in Arch Swing Add-A-Bay Unit**		**$ 1,936**	**184 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0932	3.5in OD STEEL ARCH SWING 2-UNIT ADD-A-BAY	1	$ 1,596						
	ZZXX0260	BELT SEAT W/SILVER SHIELD CHAIN FOR 8ft TOP RAIL	2	$ 170						
Swings	**500-ARCH**	**5in Arch Swing 2-Seats**		**$ 3,431**	**234 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0931	5in OD 2-UNIT STEEL ARCH SWING- 8ft TOP RAIL	1	$ 3,091						
	ZZXX0260	BELT SEAT W/SILVER SHIELD CHAIN FOR 8ft TOP RAIL	2	$ 170						
Swings	**500-ARCH-ADD**	**5in Arch Swing Add-A-Bay Unit**		**$ 2,368**	**166 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0933	5in OD STEEL ARCH SWING 2-UNIT ADD-A-BAY	1	$ 2,028						
	ZZXX0260	BELT SEAT W/SILVER SHIELD CHAIN FOR 8ft TOP RAIL	2	$ 170						
Swings	**SWING-10-2**	**Standard Swings 10ft 2-Seats**		**$ 1,924**	**243 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0825	10ft 2-UNIT STANDARD DUTY SWING	1	$ 1,524						
	ZZXX0261	BELT SEAT W/SILVER SHIELD 10ft TOP RAIL	2	$ 200						
Swings	**SWING-10-4**	**Standard Swings 10ft 4-Seats**		**$ 3,394**	**398 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0825	10ft 2-UNIT STANDARD DUTY SWING	1	$ 1,524						
	ZZXX0827	10ft STANDARD DUTY SWING- ADD-A-BAY	1	$ 1,070						
	ZZXX0261	BELT SEAT W/SILVER SHIELD 10ft TOP RAIL	4	$ 200						
Swings	**SWING-10-6**	**Standard Swings 10ft 6-Seats**		**$ 4,864**	**553 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0825	10ft 2-UNIT STANDARD DUTY SWING	1	$ 1,524						
	ZZXX0827	10ft STANDARD DUTY SWING- ADD-A-BAY	2	$ 1,070						
	ZZXX0261	BELT SEAT W/SILVER SHIELD 10ft TOP RAIL	6	$ 200						
Swings	**SWING-10-8**	**Standard Swings 10ft 8-Seats**		**$ 6,334**	**709 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0825	10ft 2-UNIT STANDARD DUTY SWING	1	$ 1,524						
	ZZXX0827	10ft STANDARD DUTY SWING- ADD-A-BAY	3	$ 1,070						
	ZZXX0261	BELT SEAT W/SILVER SHIELD 10ft TOP RAIL	8	$ 200						
Swings	**SWING-500-TIRE**	**Tire Swing**		**$ 4,826**	**254 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0950	5in ARCH TIRE SWING W/ 4/0 CHAIN	1	$ 4,826						
Swings	**SWING-500-TIRE-ADD**	**Tire Swing Add-A-Bay Unit**		**$ 3,130**	**199 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0951	5in ARCH TIRE SWING ADD-A-BAY W/ 4/0 CHAIN	1	$ 3,130						
Swings	**SWING-8-2**	**Standard Swings 8ft 2-Seats**		**$ 1,825**	**220 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0823	8ft 2-UNIT STANDARD DUTY SWING	1	$ 1,485						
	ZZXX0260	BELT SEAT W/SILVER SHIELD CHAIN FOR 8ft TOP RAIL	2	$ 170						
Swings	**SWING-8-4**	**Standard Swings 8ft 4-Seats**		**$ 3,202**	**362 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0823	8ft 2-UNIT STANDARD DUTY SWING	1	$ 1,485						
	ZZXX0824	8ft STANDARD DUTY SWING- ADD-A-BAY	1	$ 1,037						
	ZZXX0260	BELT SEAT W/SILVER SHIELD CHAIN FOR 8ft TOP RAIL	4	$ 170						
Swings	**SWING-8-6**	**Standard Swings 8ft 6-Seats**		**$ 4,579**	**504 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0823	8ft 2-UNIT STANDARD DUTY SWING	1	$ 1,485						
	ZZXX0824	8ft STANDARD DUTY SWING- ADD-A-BAY	2	$ 1,037						
	ZZXX0260	BELT SEAT W/SILVER SHIELD CHAIN FOR 8ft TOP RAIL	6	$ 170						
Swings	**SWING-8-8**	**Standard Swings 8ft 8-Seats**		**$ 5,956**	**646 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0823	8ft 2-UNIT STANDARD DUTY SWING	1	$ 1,485						
	ZZXX0824	8ft STANDARD DUTY SWING- ADD-A-BAY	3	$ 1,037						
	ZZXX0260	BELT SEAT W/SILVER SHIELD CHAIN FOR 8ft TOP RAIL	8	$ 170						
Swings	**SWING-ALONG-350**	**3.5in Swing Along**		**$ 3,646**	**298 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0635	SWING ALONG SEAT TO 8ft TOP RAIL	1	$ 1,254						
	ZZXX0934	3.5in OD SINGLE SEAT ARCH SWING- 8ft TOP RAIL	1	$ 2,392						
Swings	**SWING-ALONG-350-ADD**	**3.5in Swing Along Add-a-Bay Unit**		**$ 2,751**	**182 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0635	SWING ALONG SEAT TO 8ft TOP RAIL	1	$ 1,254						
	ZZXX0936	3.5in OD STEEL ARCH SWING SINGLE UNIT- ADD-A-BAY	1	$ 1,497						
Swings	**SWING-ALONG-500**	**5in Swing Along**		**$ 4,080**	**219 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0635	SWING ALONG SEAT TO 8ft TOP RAIL	1	$ 1,254						
	ZZXX0935	5in OD SINGLE SEAT ARCH SWING - 8ft TOP RAIL	1	$ 2,826						
Swings	**SWING-ALONG-500-ADD**	**5in Swing Along Add-a-Bay Unit**		**$ 3,182**	**151 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0635	SWING ALONG SEAT TO 8ft TOP RAIL	1	$ 1,254						
	ZZXX0937	5in OD STEEL ARCH SWING SINGLE UNIT- ADD-A-BAY	1	$ 1,928						
Swings	**SWING-HD-10-2**	**Heavy Duty Swings 10ft 2-Seats**		**$ 2,758**	**370 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0830	10ft 2-UNIT HEAVY DUTY SWING	1	$ 2,358						
	ZZXX0261	BELT SEAT W/SILVER SHIELD 10ft TOP RAIL	2	$ 200						
Swings	**SWING-HD-10-4**	**Heavy Duty Swings 10ft 4-Seats**		**$ 4,556**	**560 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0830	10ft 2-UNIT HEAVY DUTY SWING	1	$ 2,358						
	ZZXX0831	10ft HEAVY DUTY SWING- ADD-A-BAY	1	$ 1,397						
	ZZXX0261	BELT SEAT W/SILVER SHIELD 10ft TOP RAIL	4	$ 200						
Swings	**SWING-HD-10-6**	**Heavy Duty Swings 10ft 6-Seats**		**$ 6,353**	**749 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0830	10ft 2-UNIT HEAVY DUTY SWING	1	$ 2,358						
	ZZXX0831	10ft HEAVY DUTY SWING- ADD-A-BAY	2	$ 1,397						
	ZZXX0261	BELT SEAT W/SILVER SHIELD 10ft TOP RAIL	6	$ 200						
Swings	**SWING-HD-10-8**	**Heavy Duty Swings 10ft 8-Seats**		**$ 8,150**	**938 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0830	10ft 2-UNIT HEAVY DUTY SWING	1	$ 2,358						
	ZZXX0831	10ft HEAVY DUTY SWING- ADD-A-BAY	3	$ 1,397						
	ZZXX0261	BELT SEAT W/SILVER SHIELD 10ft TOP RAIL	8	$ 200						
Swings	**SWING-HD-8-2**	**Heavy Duty Swings 8ft 2-Seats**		**$ 2,465**	**338 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0828	8ft 2-UNIT HEAVY DUTY SWING	1	$ 2,125						
	ZZXX0260	BELT SEAT W/SILVER SHIELD CHAIN FOR 8ft TOP RAIL	2	$ 170						
Swings	**SWING-HD-8-4**	**Heavy Duty Swings 8ft 4-Seats**		**$ 4,115**	**515 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0828	8ft 2-UNIT HEAVY DUTY SWING	1	$ 2,125						
	ZZXX0829	8ft HEAVY DUTY SWING- ADD-A-BAY	1	$ 1,310						
	ZZXX0260	BELT SEAT W/SILVER SHIELD CHAIN FOR 8ft TOP RAIL	4	$ 170						
Swings	**SWING-HD-8-6**	**Heavy Duty Swings 8ft 6-Seats**		**$ 5,765**	**691 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0828	8ft 2-UNIT HEAVY DUTY SWING	1	$ 2,125						
	ZZXX0829	8ft HEAVY DUTY SWING- ADD-A-BAY	2	$ 1,310						
	ZZXX0260	BELT SEAT W/SILVER SHIELD CHAIN FOR 8ft TOP RAIL	6	$ 170						
Swings	**SWING-HD-8-8**	**Heavy Duty Swings 8ft 8-Seats**		**$ 7,415**	**868 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0828	8ft 2-UNIT HEAVY DUTY SWING	1	$ 2,125						
	ZZXX0829	8ft HEAVY DUTY SWING- ADD-A-BAY	3	$ 1,310						
	ZZXX0260	BELT SEAT W/SILVER SHIELD CHAIN FOR 8ft TOP RAIL	8	$ 170						
Swings	**SWING-SP**	**Single Post Swings 8ft 2-Seats**		**$ 1,977**	**276 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0818	8ft SINGLE POST SWING ASSEMBLY	1	$ 1,637						
	ZZXX0260	BELT SEAT W/SILVER SHIELD CHAIN FOR 8ft TOP RAIL	2	$ 170						
Swings	**SWING-SP-ADD**	**Single Post Swing Add-A-Bay Unit**		**$ 1,465**	**188 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0819	8ft SINGLE POST SWING ADD-A-BAY	1	$ 1,125						
	ZZXX0260	BELT SEAT W/SILVER SHIELD CHAIN FOR 8ft TOP RAIL	2	$ 170						
Swings	**SWING-SP-TOD**	**Single Post Swing with Toddler Beam**		**$ 3,014**	**333 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0818	8ft SINGLE POST SWING ASSEMBLY	1	$ 1,637						
	ZZXX0820	TODDLER SWING ADD-ON BEAM	1	$ 1,037						
	ZZXX0260	BELT SEAT W/SILVER SHIELD CHAIN FOR 8ft TOP RAIL	2	$ 170						
Unity®	**350-BASKET**	**Unity Basket Swing**		**$ 10,460**	**266 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0198	UNITY SWING FRAME	1	$ 7,935						

Legend	
T	TRUE
F	FALSE
+	Needs Modification

	ZZXX0204	BASKET SWING	1	$ 2,525						
Unity®	**350-BASKET-ADD**	**Unity Basket Swing Add-A-Bay**		**$ 10,798**	**281 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0200	UNITY SWING ADD-A-BAY	1	$ 8,273						
	ZZXX0204	BASKET SWING	1	$ 2,525						
Unity®	**350-HOOPLA**	**Unity Hoopla Swing**		**$ 9,842**	**232 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0198	UNITY SWING FRAME	1	$ 7,935						
	ZZXX0203	HOOPLA SWING	1	$ 1,907						
Unity®	**350-HOOPLA-ADD**	**Unity Hoopla Swing Add-A-Bay**		**$ 10,180**	**247 lbs**	**T**	**T**	**T**	**T**	**+**
	ZZXX0200	UNITY SWING ADD-A-BAY	1	$ 8,273						
	ZZXX0203	HOOPLA SWING	1	$ 1,907						

Part Number	Kit	List Price ($ USD)	Weight (lbs.)
ZZAC0046	CSA CANOPY SPACER RETROFIT FOR ACTIVO BAMBINO	$ 283	9.05
ZZAC0048	RETROFIT - HOOPLA SWING ROPE TETHER TO CHAIN	$ 240	8.15
ZZAC0411	GAP FILLER KIT FOR UNITY CONNECT SLIDE	$ 116	2.82
ZZBD0022	BOULDER SAMPLE KIT	$ 305	25.00
ZZFC0035	FUN CENTER TOOLS & SERVICE KIT W/ AEROSOL	$ 78	1.83
ZZFC0036	FUN CENTER TOOLS & SERVICE KIT W/O AEROSOL	$ 59	1.29
ZZFC0037	FUN CENTER CANOPY (EN) FILLER KIT	$ 148	2.37
ZZFC0038	GAP FILLER KIT FOR FUNCENTER STRAIGHT SLIDES	$ 121	2.14
ZZFC0039	GAP FILLER KIT FOR FUNCENTER CURVED SLIDES	$ 104	1.91
ZZFP9999	FIRST PLAY ADDITIONAL PARTS	$ 92	1.23
ZZLT0068	LIFETRAIL TOOL & PARTS KIT W/ AEROSOL	$ 230	2.03
ZZLT0069	LIFETRAIL TOOL & PARTS KIT W/O AEROSOL	$ 197	0.95
ZZPD5112P	TODDLER FUNCENTER CSA SITDOWN RETRO KIT PRIMARY	$ 83	1.94
ZZUN2290	COATED DECK TO DECK CONNECTION KIT	$ 18	0.29
ZZUN2616	CSA SIT DOWN RETROFIT KIT SHT PLASTIC/PERF BARRIERS	$ 203	2.38
ZZUN2618	CSA SIT DOWN RETROFIT KIT FOR GLIDE SLIDE TUBING BARRIERS	$ 432	5.59
ZZUN2619	CSA SIT DOWN RETROFIT KIT FOR WIDE GLIDE SLIDE TUBING BARRIERS	$ 356	4.01
ZZUN2739	CANADIAN/EN COMPLIANCE KIT FOR RUMBLE/TWIST & SHOUT SLIDES	$ 229	2.09
ZZUN3125	GLIDE SLIDE FOOTER RETROFIT	$ 65	2.75
ZZUN3199	CANADIAN AND EN COMPLIANCE KIT	$ 130	2.09
ZZUN3537	RETROFIT KIT- 360 SPIRAL SLIDE	$ 181	4.65
ZZUN8226	CSA SIT DOWN RETROFIT KIT FOR ROCKBLOCK SLIDE	$ 491	15.88
ZZUN8227	CSA CANOPY RETROFIT KIT FOR ADVENTURE SLIDES	$ 579	10.53
ZZUN8756	PLAYCUBES - EN KIT	$ 164	3.55
ZZUN8757	EN KIT- PLAYCUBES PLASTIC SLIDE	$ 43	0.1
ZZUN9910	SURFACING WARNING LABEL KIT	$ 4	0.05
ZZUN9930	PIPE SYSTEMS MAINTEANCE KIT W/ AEROSOL	$ 324	13.07
ZZUN9935	PIPE SYSTEMS MAINTEANCE KIT W/O AEROSOL	$ 270	11.55
ZZUN9966	LIFETRAIL MAINTENANCE KIT W/ AEROSOL	$ 288	12.3
ZZUN9967	LIFETRAIL MAINTENANCE KIT W/O AEROSOL	$ 232	10.78
ZZXX0050	SAFETY AUDIT (PROBE & GAUGE) KIT	$ 541	4.44
ZZXX0055	TRANSFER STATION LAYOUT TEMPLATE	$ 164	0.84
ZZXX0056	DECK LAYOUT TEMPLATE	$ 563	3.36
ZZXX0058	TRANSFER STATION INSTALLATION TOOL	$ 225	5.22
ZZXX0086	BAMBINO/UNITY CONNECT MAINT. KIT W/ AEROSOL	$ 241	13.03
ZZXX0087	BAMBINO/UNITY CONNECT MAINT. KIT W/O AEROSOL	$ 197	11.51
ZZXX0094	ENERGI MAINTENANCE KIT W/ AEROSOL	$ 204	10.61
ZZXX0095	ENERGI MAINTENANCE KIT W/O AEROSOL	$ 155	9.09
ZZXX0173	SPINAMI RETRO-FIT KIT	$ 841	44.44
ZZXX0177	DUO SEE-SAW RETRO-FIT KIT	$ 470	2.49
ZZXX0196	TEETER TUNNEL SEE-SAW W/ LEXAN TOP RETRO-FIT	$ 10,516	646.31
ZZXX0197	TEETER TUNNEL SEE-SAW W/ PERF TOP RETRO-FIT	$ 10,516	656.81
ZZXX0207	EXERCISE MAINTENANCE KIT W/ AEROSOL	$ 203	9.67
ZZXX0208	EXERCISE MAINTENANCE KIT W/O AEROSOL	$ 155	8.15
ZZXX0353	GAP FILLER KIT FOR UNITY SLIDE CLIMBER	$ 160	3.84
ZZXX0356	CURISE LINE TROLLEY RETRO-FIT	$ 9,402	150.03
ZZXX0357	CRUISE LINE ROPE REPLACEMENT- RETROFIT	$ 694	20.87
ZZXX0485	ROPE BRIDGE RETRO FIT KIT (BOULDER)	$ 858	4.67
ZZXX0486	ROPE BRIDGE RETRO FIT KIT (DECK)	$ 863	4.77
ZZXX0504	AEROGLIDER AXLE/ARM RETRO FIT	$ 8,495	76.21
ZZXX0559	SPRING RIDER ELECTRONICS	$ 1,583	2.84
ZZXX0573	ROTO SPRING RIDER ELECTRONICS	$ 1,655	2.57
ZZXX0576	ROCKY RIDGE RETRO (BLACK ROPE ONLY)	$ 688	3.98
ZZXX0576S	ROCKY RIDGE RETRO (SURFACE MOUNT)	$ 688	3.92
ZZXX0619	REPLACEMENT SPRING RETROFIT KIT FOR ACTION VEHICLES	$ 1,157	101.65
ZZXX0678	LABEL KIT- COMPOSITE STRUCTURE	$ 14	0.04
ZZXX0683	ROPE COLOR SAMPLES - FIVE COLORS	$ 87	0.6
ZZXX0684	SHADE FABRIC COLOR SAMPLES	$ 6	1.6
ZZXX0686	ROTO COLOR SAMPLES	$ 125	2.8
ZZXX0687	SHEET PLASTIC COLOR SAMPLES	$ 207	2.9
ZZXX0688	POWDER COATING PAINT SAMPLES	$ 250	0.5
ZZXX0689	ROPE COLOR SAMPLES - SEVEN COLORS	$ 129	0.8
ZZXX0844	STAINLESS SLIDE BARRIER RETRO KIT	$ 170	1
ZZXX0851	SLING SEAT- RETRO FIT- CH	$ 240	7.7
ZZXX0852	SLING SEAT- RETRO FIT- PM	$ 247	8.2
ZZXX0853	REPLACEMENT ROPE FOR SURF RIDER	$ 98	1.5
ZZXX0855	HOOPLA - RETRO KIT ROPE	$ 650	9.72
ZZXX0856	BRANCH OUT TREE TOP RETRO KIT	$ 994	22.1
ZZXX0857	SPIN R GREASE TUBE RETRO FIT KIT	$ 3,219	18.2
ZZXX0858	VAQUERO ROPE - RETRO KIT	$ 752	11.1
ZZXX0859	SPIN R NEW GUIDE WHEELS AND BEARING	$ 3,042	11.8
ZZXX0860	RETRO KIT- NUVO- 36in TRANSFER STATION (CH)	$ 1,670	110.89
ZZXX0861	RETRO KIT- NUVO- 48in TRANSFER STATION (CH)	$ 3,614	151.06
ZZXX0862	RETRO KIT- NUVO- 36in TRANSFER STATION - PM	$ 1,711	111.37
ZZXX0863	RETRO KIT- NUVO- 48in TRANSFER STATION - PM	$ 2,308	151.56
ZZXX0870	SKYRAIL- TROLLEY RETRO FIT KIT	$ 902	5.2
ZZXX0871	SKYRAIL- TROLLEY RETRO FIT KIT - EN	$ 1,099	5.8
ZZXX0915	BOLT KIT - CONE SPINNERS	$ 60	0.4
ZZXX0926	BRANCHOUT POD REPLACEMENT	$ 205	2.6
ZZXX0927	FROX BALL TUBE CASTING RETRO KIT	$ 21	0.40
ZZXX0999	NEOS - POWER SUPPLY KIT	$ 1,103	23.12
ZZXX1144	LIVE WIRE CABLE RETRO KIT	$ 4,036	73.28
ZZXX1147	LIVE WIRE TROLLEY RETRO KIT	$ 684	12.18
ZZXX1148	LIVE WIRE CABLE MAINTENANCE KIT	$ 750	35.61
ZZXX1149	LIVE WIRE CABLE GUARD KIT	$ 87	0.26
ZZXX1151	LIVE WIRE SPRING BRAKE KIT	$ 76	0.3
ZZXX1469	DROP ZONE TOP BEARING RETROFIT KIT	$ 695	2.96
ZZXX1470	DROP ZONE BILGE PUMP ASSEMBLY	$ 873	8.71
ZZXX1471	KIT - CAUTION - WATCH YOUR HEAD	$ 207	1.0
ZZXX1650	COCOON RETRO FIT KIT	$ 41	1.13
ZZXX1651	SPACER- COCOON WATER DRAINAGE	$ 55	1.5
ZZXX9428	ECO-ARMOR REPAIR KIT	$ 33	1.0
ZZXX9429	GROUP BUILD TOOL KIT	$ 334	1.51

LifeTrail© Advanced Wellness System - In-Ground Mount Pricing

Activity Panels:					Stations with Post Caps			Stations with a Roof		
ZZ#	Description	Weight (lbs)	Activity Price ($ USD)	Station	Item #	Weight (lbs)	List Price ($ USD)	Item #	Weight (lbs)	List Price ($ USD)
ZZLT0044	Frame with post caps	167.09	$ 1,441	n/a	n/a	n/a	n/a	n/a	n/a	n/a
ZZLT0045	Frame with roof	216.26	$ 2,686							
ZZLT0066	Welcome Sign	21.07	$ 808	1	LAWS-1C	482	$12,024	LAWS-1R	531	$13,269
ZZLT0047	Lower-Body Cycling Exercises	168.54	$ 7,275							
ZZLT0054	PNF Exercises	122.9	$ 2,500							
ZZLT0050	Push-Up Exercises	50.85	$ 1,710	2	LAWS-2C	494	$8,071	LAWS-2R	543	$9,316
ZZLT0057	Hip Lift & Thigh Squeeze Exercises	171.99	$ 2,737							
ZZLT0051	Wobble Board Exercises	101.24	$ 2,183							
ZZLT0046	Upper-Body Cycling Exercises	75.72	$ 6,700	3	LAWS-3C	349	$11,190	LAWS-3R	398	$12,435
ZZLT0052	Squat Exercises	40.62	$ 1,160							
ZZLT0056	Triceps Strength & Torso Stability Exercises	62.88	$ 1,889							
ZZLT0053	Weighted Squat Exercises	242.32	$ 6,275	4	LAWS-4C	655	$12,257	LAWS-4R	705	$13,502
ZZLT0049	Inverted Row Exercises	204.68	$ 3,331							
ZZLT0048	Shoulder Stability & Strength Exercises	38.97	$ 1,210							
ZZLT0055	Stair Exercises	288.11	$ 4,800	5	LAWS-5C	781	$13,444	LAWS-5R	830	$14,689
ZZLT0058	Overhead Press (Reg & ADA)	282.79	$ 6,159							
ZZLT0063	Standing Stretches & Yoga Poses	40.62	$ 1,044							
	Standard System (5-Stations) Total:				**LAWS-5000C**	**2,751**	**$56,986**	**LAWS-5000R**	**2,997**	**$63,211**
ZZLT0061	PNF Exercises (ADA)	31.27	$ 934	ADA 1	LAWS-6C	311	$10,087	LAWS-6R	360	$11,332
ZZLT0062	Triceps Strength & Torso Stability Exercises (ADA)	34.62	$ 1,037							
ZZLT0059	Upper-Body Cycling (ADA)	75.72	$ 6,675							
ZZLT0058	Overhead Press (Reg & ADA)	282.79	$ 6,159	ADA 2	LAWS-7C	512	$9,651	LAWS-7R	562	$10,896
ZZLT0064	Stretches (ADA)	21.07	$ 803							
ZZLT0060	Shoulder Stability & Strength Exercises (ADA)	38.97	$ 1,248							
	2-ADA Stations Sub-Total:				n/a			n/a		
	All-Inclusive System (7-Stations) Total:				**LAWS-7000C**	**3,570**	**$76,724**	**LAWS-7000R**	**3,914**	**$85,439**

LifeTrail® Advanced Wellness System - Surface Mount Pricing

Activity Panels:					Stations with Post Caps			Stations with a Roof		
ZZ#	Description	Weight (lbs)	Activity Price ($ USD)	Station	Item #	Weight (lbs)	List Price ($ USD)	Item #	Weight (lbs)	List Price ($ USD)
ZZLT0044S	Frame with post caps (SM)	136.19	$ 1,441	n/a	n/a	n/a	n/a	n/a	n/a	n/a
ZZLT0045S	Frame with roof (SM)	185.36	$ 2,686							
ZZLT0066	Welcome Sign	21.07	$ 808	1	LAWS-1C-SM	397	$12,024	LAWS-1R-SM	446	$13,269
ZZLT0047S	Lower-Body Cycling Exercises (SM)	135.87	$ 7,275							
ZZLT0054S	PNF Exercises (SM)	101.16	$ 2,500							
ZZLT0050S	Push-Up Exercises (SM)	43.32	$ 1,710	2	LAWS-2C-SM	394	$8,071	LAWS-2R-SM	443	$9,316
ZZLT0057S	Hip Lift & Thigh Squeeze Exercises (SM)	132.9	$ 2,737							
ZZLT0051S	Wobble Board Exercises (SM)	79.06	$ 2,183							
ZZLT0046	Upper-Body Cycling Exercises	75.72	$ 6,700	3	LAWS-3C-SM	304	$11,190	LAWS-3R-SM	354	$12,435
ZZLT0052	Squat Exercises	40.62	$ 1,160							
ZZLT0056S	Triceps Strength & Torso Stability Exercises (SM)	49.42	$ 1,889							
ZZLT0053S	Weighted Squat Exercises (SM)	175.04	$ 6,275	4	LAWS-4C-SM	510	$12,257	LAWS-4R-SM	560	$13,502
ZZLT0049S	Inverted Row Exercises (SM)	157.76	$ 3,331							
ZZLT0048	Shoulder Stability & Strength Exercises	38.97	$ 1,210							
ZZLT0055S	Stair Exercises (SM)	252.21	$ 4,800	5	LAWS-5C-SM	647	$13,444	LAWS-5R-SM	696	$14,689
ZZLT0058S	Overhead Press (Reg & ADA) (SM)	215.51	$ 6,159							
ZZLT0063	Standing Stretches & Yoga Poses	40.62	$ 1,044							
	Standard System (5-Stations) Total (Surface Mount):				**LAWS-5000C-SM**	**2,243**	**$56,986**	**LAWS-5000R-SM**	**2,488**	**$63,211**
ZZLT0061S	PNF Exercises (ADA) (SM)	26.87	$ 934	ADA 1	LAWS-6C-SM	268	$10,087	LAWS-6R-SM	317	$11,332
ZZLT0062S	Triceps Strength & Torso Stability Exercises (ADA) (SM)	26.81	$ 1,037							
ZZLT0059	Upper-Body Cycling (ADA)	75.72	$ 6,675							
ZZLT0058S	Overhead Press (Reg & ADA) (SM)	215.51	$ 6,159	ADA 2	LAWS-7C-SM	414	$9,651	LAWS-7R-SM	463	$10,896
ZZLT0064	Stretches (ADA)	21.07	$ 803							
ZZLT0060	Shoulder Stability & Strength Exercises (ADA)	38.97	$ 1,248							
	2-ADA Stations Sub-Total (Surface Mount):				n/a			n/a		
	All-Inclusive System (7-Stations) Total (Surface Mount):				**LAWS-7000C-SM**	**2,920**	**$76,724**	**LAWS-7000R-SM**	**3,264**	**$85,439**

ZZLT0065	Custom Sign	21.07	$ 1,812

Category	Part Number	DESCRIPTION	List Price ($ USD)	Weight (lbs)	ASTM Certified	CPSC Compliant	CSA Certified	EN Certified
SiteAmenity	ZZBRH538I	TWO-BIKE LOOP IN-GROUND	$ 152	25	F	F	F	F
SiteAmenity	ZZBRH538S	TWO-BIKE LOOP (SM)	$ 179	34	F	F	F	F
SiteAmenity	ZZBRI538P	PORTABLE EIGHT-BIKE RACK	$ 698	69	F	F	F	F
SiteAmenity	ZZBRK538I	MULTI-BIKE SQUIGGLE IN-GROUND	$ 350	43	F	F	F	F
SiteAmenity	ZZBRK538S	MULTI-BIKE SQUIGGLE (SM)	$ 409	41	F	F	F	F
SiteAmenity	ZZCN420D	6' CONTEMPORARY BENCH WITH BACK - DIAMOND - PORTABLE/SURFACE MOUNT	$ 1,137	172	F	F	F	F
SiteAmenity	ZZCN420P	6' CONTEMPORARY BENCH WITH BACK - PERFORATED - PORTABLE/SURFACE MOUNT	$ 1,253	195	F	F	F	F
SiteAmenity	ZZCN420R	6' CONTEMPORARY BENCH WITH BACK - RIB - PORTABLE/SURFACE MOUNT	$ 1,262	235	F	F	F	F
SiteAmenity	ZZCN420S	6' CONTEMPORARY BENCH WITH BACK - SLAT - PORTABLE/SURFACE MOUNT	$ 1,417	254	F	F	F	F
SiteAmenity	ZZCN425D	6' CONTEMPORARY BENCH WITHOUT BACK - DIAMOND - PORTABLE/SURFACE MOUNT	$ 998	157	F	F	F	F
SiteAmenity	ZZCN425P	6' CONTEMPORARY BENCH WITHOUT BACK - PERFORATED - PORTABLE/SURFACE MOUNT	$ 1,129	174	F	F	F	F
SiteAmenity	ZZCN425R	6' CONTEMPORARY BENCH WITHOUT BACK - RIB - PORTABLE/SURFACE MOUNT	$ 1,133	212	F	F	F	F
SiteAmenity	ZZCN425S	6' CONTEMPORARY BENCH WITHOUT BACK - SLAT - PORTABLE/SURFACE MOUNT	$ 1,253	222	F	F	F	F
SiteAmenity	ZZCN430D	6' CONTEMPORARY BENCH WITH BACK - DIAMOND - IN-GROUND	$ 1,116	163	F	F	F	F
SiteAmenity	ZZCN430P	6' CONTEMPORARY BENCH WITH BACK - PERFORATED - IN-GROUND	$ 1,232	186	F	F	F	F
SiteAmenity	ZZCN430R	6' CONTEMPORARY BENCH WITH BACK - RIB - IN-GROUND	$ 1,236	226	F	F	F	F
SiteAmenity	ZZCN430S	6' CONTEMPORARY BENCH WITH BACK - SLAT - IN-GROUND	$ 1,381	245	F	F	F	F
SiteAmenity	ZZCN435D	6' CONTEMPORARY BENCH WITHOUT BACK - DIAMOND - IN-GROUND	$ 980	159	F	F	F	F
SiteAmenity	ZZCN435P	6' CONTEMPORARY BENCH WITHOUT BACK - PERFORATED - IN-GROUND	$ 1,096	176	F	F	F	F
SiteAmenity	ZZCN435R	6' CONTEMPORARY BENCH WITHOUT BACK - RIB - IN-GROUND	$ 1,106	214	F	F	F	F
SiteAmenity	ZZCN435S	6' CONTEMPORARY BENCH WITHOUT BACK - SLAT - IN-GROUND	$ 1,252	224	F	F	F	F
SiteAmenity	ZZCO1119C	6' COVINGTON BENCH WITH BACK/ARMS - SLAT - PORTABLE/SURFACE MOUNT	$ 1,579	108	F	F	F	F
SiteAmenity	ZZCY420D	6' COURTYARD BENCH WITH BACK - DIAMOND - PORTABLE/SURFACE MOUNT	$ 1,281	124	F	F	F	F
SiteAmenity	ZZCY420P	6ft BENCH W/BACK - PERFORATED	$ 1,426	157	F	F	F	F
SiteAmenity	ZZDT100N	TRASH DOME TOP	$ 148	12	F	F	F	F
SiteAmenity	ZZDT101N	RECYCLE DOME TOP	$ 150	7	F	F	F	F
SiteAmenity	ZZFT100N	FLAT TOP	$ 128	9	F	F	F	F
SiteAmenity	ZZFT106N	RECYCLE FLAT TOP	$ 160	7	F	F	F	F
SiteAmenity	ZZGR100N	VANDAL-RESISTANT FIREBOX	$ 570	79	F	F	F	F
SiteAmenity	ZZGR101N	FIREBOX	$ 412	79	F	F	F	F
SiteAmenity	ZZGR102N	ADJUSTABLE GROUP GRILL	$ 1,040	246	F	F	F	F
SiteAmenity	ZZGR103N	ADJUSTABLE GRATE FIRE RING	$ 477	86	F	F	F	F
SiteAmenity	ZZGR104N	GROUP GRILL	$ 2,094	460	F	F	F	F
SiteAmenity	ZZGR105N	COVERED GRILL	$ 1,040	188	F	F	F	F
SiteAmenity	ZZGR106N	FIRE RING	$ 424	95	F	F	F	F
SiteAmenity	ZZGV100G	32 GALLON RECYCLED PLASTIC RECEPTACLE WITH LINER - IN-GROUND	$ 717	67	F	F	F	F
SiteAmenity	ZZGV106G	6' RECYCLED PLASTIC PICNIC TABLE - PORTABLE	$ 1,376	267	F	F	F	F
SiteAmenity	ZZGV111G	8' RECYCLED PLASTIC PICNIC TABLE - PORTABLE	$ 1,628	287	F	F	F	F
SiteAmenity	ZZGV115G	ADA 8' RECYCLED PLASTIC PICNIC TABLE - PORTABLE	$ 1,856	276	F	F	F	F
SiteAmenity	ZZGV140G	SQUARE RECYCLED PLASTIC TABLE WITH FOUR SEATS - PORTABLE	$ 1,765	322	F	F	F	F
SiteAmenity	ZZGV229G	SQUARE RECYCLED PLASTIC TABLE WITH FOUR SEATS - SURFACE MOUNT	$ 2,032	383	F	F	F	F
SiteAmenity	ZZGV230G	SQUARE RECYCLED PLASTIC TABLE WITH FOUR SEATS - IN-GROUND	$ 2,032	369	F	F	F	F
SiteAmenity	ZZGV234G	SQUARE RECYCLED PLASTIC TABLE WITH THREE SEATS - SURFACE MOUNT	$ 1,878	349	F	F	F	F
SiteAmenity	ZZGV235G	SQUARE RECYCLED PLASTIC TABLE WITH THREE SEATS - IN-GROUND	$ 1,878	335	F	F	F	F
SiteAmenity	ZZGV240G	SQUARE RECYCLED PLASTIC TABLE WITH TWO SEATS - IN-GROUND	$ 484	291	F	F	F	F
SiteAmenity	ZZGV245G	SQUARE RECYCLED PLASTIC TABLE WITH TWO SEATS - SURFACE MOUNT	$ 1,730	305	F	F	F	F
SiteAmenity	ZZGV300G	32 GALLON RECYCLED PLASTIC RECEPTACLE WITH LINER - PORTABLE	$ 714	55	F	F	F	F
SiteAmenity	ZZGV301G	6' RECYCLED PLASTIC PLANK BENCH WITH BACK - PORTABLE	$ 832	128	F	F	F	F
SiteAmenity	ZZGV302G	6' RECYCLED PLASTIC PLANK BENCH WITHOUT BACK - PORTABLE	$ 483	70	F	F	F	F
SiteAmenity	ZZGV303G	6' RECYCLED PLASTIC PLANK BENCH WITH BACK - IN-GROUND	$ 832	127	F	F	F	F
SiteAmenity	ZZGV304G	6' RECYCLED PLASTIC PLANK BENCH WITHOUT BACK - IN-GROUND	$ 484	69	F	F	F	F
SiteAmenity	ZZGV306G	6' RECYCLED PLASTIC PLANK BENCH WITH BACK - SURFACE MOUNT	$ 836	121	F	F	F	F
SiteAmenity	ZZGV307G	6' RECYCLED PLASTIC PLANK BENCH WITHOUT BACK - SURFACE MOUNT	$ 484	63	F	F	F	F
SiteAmenity	ZZGV420G	6' RECYCLED PLASTIC CONTEMPORARY BENCH WITH BACK - SURFACE MOUNT	$ 1,384	160	F	F	F	F
SiteAmenity	ZZGV430G	6' RECYCLED PLASTIC CONTEMPORARY BENCH WITH BACK - IN-GROUND	$ 1,351	150	F	F	F	F
SiteAmenity	ZZLR100N	INGROUND POST PACKAGE	$ 96	12	F	F	F	F
SiteAmenity	ZZLR105N	SURFACE MOUNT POST PACKAGE	$ 92	12	F	F	F	F
SiteAmenity	ZZLR200D	TRADITIONAL 22 GALLON RECEPTACLE - DIAMOND	$ 355	57	F	F	F	F
SiteAmenity	ZZLR210N	22 GALLON RECEPTACLE LINER	$ 41	4	F	F	F	F
SiteAmenity	ZZLR300D	TRADITIONAL 32 GALLON RECEPTACLE - DIAMOND	$ 368	67	F	F	F	F
SiteAmenity	ZZLR300P	32 GALLON RECEPTACLE- PERFORATED	$ 515	85	F	F	F	F
SiteAmenity	ZZLR300S	TRADITIONAL 32 GALLON RECEPTACLE - SLAT	$ 679	175	F	F	F	F
SiteAmenity	ZZLR310N	32 GALLON LINER	$ 47	7	F	F	F	F
SiteAmenity	ZZSG106D	6' RECTANGLE TABLE - DIAMOND - PORTABLE	$ 1,038	225	F	F	F	F
SiteAmenity	ZZSG106P	6ft TABLE - 2-3/8in LEGS- PERFORATED	$ 1,213	257	F	F	F	F
SiteAmenity	ZZSG111D	8' RECTANGLE TABLE - DIAMOND - PORTABLE	$ 1,147	270	F	F	F	F
SiteAmenity	ZZSG111P	8ft TABLE - 2-3/8in LEGS- PERFORATED	$ 1,343	333	F	F	F	F
SiteAmenity	ZZSG115D	ADA 8' RECTANGLE TABLE - DIAMOND - PORTABLE	$ 1,114	254	F	F	F	F
SiteAmenity	ZZSG115P	8ft ADA TABLE - 2-3/8in LEGS- PERFORATED	$ 1,303	308	F	F	F	F
SiteAmenity	ZZSG120D	10' RECTANGLE TABLE - DIAMOND - PORTABLE	$ 1,719	352	F	F	F	F
SiteAmenity	ZZSG122D	ADA 10' SIDE BY SIDE TABLE - DIAMOND - PORTABLE	$ 1,949	387	F	F	F	F
SiteAmenity	ZZSG135N	SURFACE MOUNT PACKAGE FOR 2 3/8 LEGS (SET OF 2)	$ 29	2	F	F	F	F
SiteAmenity	ZZSG140D	46" SQUARE TABLE - DIAMOND - PORTABLE	$ 1,147	196	F	F	F	F
SiteAmenity	ZZSG140P	46in SQUARE TABLE - PERFORATED	$ 1,343	248	F	F	F	F
SiteAmenity	ZZSG145D	46" OCTAGON TABLE - DIAMOND - PORTABLE	$ 1,282	198	F	F	F	F
SiteAmenity	ZZSG150D	46" ROUND TABLE - DIAMOND - PORTABLE	$ 1,216	189	F	F	F	F
SiteAmenity	ZZSG150P	46in ROUND TABLE - PERFORATED - PORTABLE	$ 1,422	224	F	F	F	F
SiteAmenity	ZZSG171D	46" SQUARE TOT TABLE - DIAMOND - PORTABLE	$ 1,265	177	F	F	F	F
SiteAmenity	ZZSG171P	46in SQ. CHILDREN S TABLE- PERFORATED	$ 1,480	229	F	F	F	F
SiteAmenity	ZZSG176D	6' TOT TABLE - DIAMOND - PORTABLE	$ 992	142	F	F	F	F
SiteAmenity	ZZSG176P	6' TOT TABLE - PERFORATED - PORTABLE	$ 1,161	179	F	F	F	F
SiteAmenity	ZZSG205D	6' SEPARATE BENCH TABLE - DIAMOND - IN-GROUND	$ 1,335	302	F	F	F	F
SiteAmenity	ZZSG205P	6ft TABLE - MULTI PEDESTAL- PERFORATED	$ 1,563	334	F	F	F	F
SiteAmenity	ZZSG206D	8' SEPARATE BENCH TABLE - DIAMOND - IN-GROUND	$ 1,476	347	F	F	F	F
SiteAmenity	ZZSG206P	8ft TABLE - MULTI PEDESTAL- PERFORATED	$ 1,728	410	F	F	F	F
SiteAmenity	ZZSG207D	ADA 8' SEPARATE BENCH TABLE - DIAMOND - IN-GROUND	$ 1,437	328	F	F	F	F
SiteAmenity	ZZSG207P	8ft ADA TABLE- MULTI PEDESTAL- PERFORATED	$ 1,681	382	F	F	F	F
SiteAmenity	ZZSG215D	40" SQUARE TABLE WITH FOUR SEATS - DIAMOND - IN-GROUND	$ 1,393	238	F	F	F	F
SiteAmenity	ZZSG215P	40in SQUARE TABLE W/ FOUR SEATS- PERFORATED- IN-GROUND	$ 1,631	279	F	F	F	F
SiteAmenity	ZZSG230D	46" SQUARE TABLE WITH FOUR SEATS - DIAMOND - IN-GROUND	$ 1,467	243	F	F	F	F
SiteAmenity	ZZSG230P	46in SQUARE TABLE W/ FOUR SEATS- PERFORATED- IN-GROUND	$ 1,718	295	F	F	F	F
SiteAmenity	ZZSG235D	ADA 46" SQUARE TABLE WITH THREE SEATS - DIAMOND - IN-GROUND	$ 1,349	217	F	F	F	F
SiteAmenity	ZZSG235P	46in SQUARE TABLE W/ THREE SEATS- PERFORATED- IN-GROUND	$ 1,578	263	F	F	F	F
SiteAmenity	ZZSG300D	6' BENCH WITH BACK - DIAMOND - PORTABLE	$ 606	114	F	F	F	F
SiteAmenity	ZZSG300P	6ft BENCH W/ BACK - PERFORATED - PORTABLE	$ 667	126	F	F	F	F
SiteAmenity	ZZSG300PBB	6' BUDDY BENCH WITH BACK -PERFORATED - PORTABLE	$ 660	126	F	F	F	F
SiteAmenity	ZZSG301D	6' BACKLESS BENCH - DIAMOND - PORTABLE	$ 381	65	F	F	F	F
SiteAmenity	ZZSG301P	6ft BENCH W/O BACK- PERFORATED - PORTABLE	$ 393	70	F	F	F	F

SiteAmenity	ZZSG303D	6' BENCH WITH BACK - DIAMOND - IN-GROUND	$	566	113	F	F	F	F
SiteAmenity	ZZSG303P	6ft BENCH W/ BACK - PERFORATED - IN-GROUND	$	623	125	F	F	F	F
SiteAmenity	ZZSG303PBB	6' BUDDY BENCH WITH BACK -PERFORATED - IN-GROUND	$	618	125	F	F	F	F
SiteAmenity	ZZSG304D	6' BACKLESS BENCH - DIAMOND - IN-GROUND	$	333	64	F	F	F	F
SiteAmenity	ZZSG304P	6ft BENCH W/O BACK- PERFORATED - IN-GROUND	$	366	69	F	F	F	F
SiteAmenity	ZZSG306D	6' BENCH WITH BACK - DIAMOND - SURFACE MOUNT	$	566	107	F	F	F	F
SiteAmenity	ZZSG306P	6ft BENCH W/ BACK - PERFORATED - SURFACE MOUNT	$	623	119	F	F	F	F
SiteAmenity	ZZSG306PBB	6' BUDDY BENCH WITH BACK -PERFORATED - SURFACE MOUNT	$	618	119	F	F	F	F
SiteAmenity	ZZSG307D	6' BACKLESS BENCH - DIAMOND - SURFACE MOUNT	$	333	58	F	F	F	F
SiteAmenity	ZZSG307P	6ft BENCH W/O BACK- PERFORATED - SURFACE MOUNT	$	364	63	F	F	F	F
SiteAmenity	ZZSG312D	8' BENCH WITH BACK - DIAMOND - PORTABLE	$	673	133	F	F	F	F
SiteAmenity	ZZSG312P	8ft BENCH W/ BACK - PERFORATED - PORTABLE	$	741	154	F	F	F	F
SiteAmenity	ZZSG313D	8' BACKLESS BENCH - DIAMOND - PORTABLE	$	433	81	F	F	F	F
SiteAmenity	ZZSG313P	8ft BENCH W/O BACK- PERFORATED - PORTABLE	$	477	90	F	F	F	F
SiteAmenity	ZZSG315D	8' BENCH WITH BACK - DIAMOND - IN-GROUND	$	660	132	F	F	F	F
SiteAmenity	ZZSG315P	8ft BENCH W/ BACK - PERFORATED - IN-GROUND	$	726	153	F	F	F	F
SiteAmenity	ZZSG316D	8' BACKLESS BENCH - DIAMOND - IN-GROUND	$	385	74	F	F	F	F
SiteAmenity	ZZSG316P	8ft BENCH W/O BACK- PERFORATED - IN-GROUND	$	403	83	F	F	F	F
SiteAmenity	ZZSG318D	8' BENCH WITH BACK - DIAMOND - SURFACE MOUNT	$	660	126	F	F	F	F
SiteAmenity	ZZSG318P	8ft BENCH W/ BACK - PERFORATED - SURFACE MOUNT	$	726	147	F	F	F	F
SiteAmenity	ZZSG319D	8' BACKLESS BENCH - DIAMOND - SURFACE MOUNT	$	385	68	F	F	F	F
SiteAmenity	ZZSG319P	8ft BENCH W/O BACK- PERFORATED - SURFACE MOUNT	$	424	77	F	F	F	F
SiteAmenity	ZZSG345N	SIGNATURE BOLT-ON ARM REST	$	120	12	F	F	F	F
SiteAmenity	ZZSY135D	7' INDIVIDUAL SEAT TABLE - DIAMOND - PORTABLE/SURFACE MOUNT	$	1,604	274	F	F	F	F
SiteAmenity	ZZSY135P	7ft PICNIC TABLE- PERFORATED- PORTABLE/SM	$	1,765	311	F	F	F	F
SiteAmenity	ZZSY225D	7' INDIVIDUAL SEAT TABLE - DIAMOND - IN-GROUND	$	1,748	303	F	F	F	F
SiteAmenity	ZZXX1402	6FT PICNIC TABLE (COATED TOP & PAINTED FRAME)	$	1,493	210.74	F	F	F	F
SiteAmenity	ZZXX1404	8ft PICNIC TABLE (COATED TOP & PAINTED FRAME)	$	1,808	249.4	F	F	F	F
SiteAmenity	ZZXX1406	ACCESSIBLE PICNIC TABLE (COATED TOP & PAINTED FRAME)	$	1,706	233.95	F	F	F	F
SiteAmenity	ZZXX1409	HOLD DOWN KIT	$	135	2.01	F	F	F	F
SiteAmenity	ZZXX1411	6ft PERMANENT BENCH (COATED PLANKS & PAINTED FRAME)	$	667	84.89	F	F	F	F
SiteAmenity	ZZXX1411S	6ft PERMANENT BENCH (COATED PLANKS & PAINTED FRAME) - SURFACE MOUNT	$	667	81.49	F	F	F	F
SiteAmenity	ZZXX1414	PERF TRASHCAN	$	614	52.01	F	F	F	F
SiteAmenity	ZZXX1415	IN-GROUND MOUNT FOR TRASHCAN	$	108	8.75	F	F	F	F
SiteAmenity	ZZXX1416	TRASHCAN L-BOLT ANCHOR KIT	$	14	0.97	F	F	F	F
SiteAmenity	ZZXX1418	METAL TRASHCAN LID W/CABLE ATTACHMENT	$	203	11.37	F	F	F	F
SiteAmenity	ZZXX1474	TRASHCAN W/ LID AND LINER	$	880	68.4	F	F	F	F
SiteAmenity	ZZXX8060	REPLACEMENT 32 GALLON PLASTIC CONTAINER W/LID	$	43	5	F	F	F	F

Category	Part Number	DESCRIPTION	List Price ($ USD)	Weight (lbs)	ASTM Certified	CPSC Compliant	CSA Certified	EN Certified
PlayShade	DS924573	5/8" Anchor Bolt Kit	$ 82	11.11	F	F	F	F
PlayShade	DS924576	7/8" Anchor Bolt Kit	$ 136	22.77	F	F	F	F
PlayShade	DS924577	1-1/4" Anchor Bolt Kit	$ 406	68.20	F	F	F	F
PlayShade	ZZ924573	5/8" Anchor Bolt Kit	$ 82	11.11	F	F	F	F
PlayShade	ZZ924576	7/8" Anchor Bolt Kit	$ 136	22.77	F	F	F	F
PlayShade	ZZ924577	1-1/4" Anchor Bolt Kit	$ 406	68.20	F	F	F	F
PlayShade	ZZPSH001	Hip 10'x20'x8' - In-Ground Post	$ 5,847	366	F	F	F	F
PlayShade	ZZPSH002	Hip 10'x20'x8' - Recessed Base Plate	$ 6,438	366	F	F	F	F
PlayShade	ZZPSH003	Hip 10'x20'x10' - In-Ground Post	$ 5,988	457	F	F	F	F
PlayShade	ZZPSH004	Hip 10'x20'x10' - Recessed Base Plate	$ 6,580	475	F	F	F	F
PlayShade	ZZPSH005	Hip 10'x20'x12' - In-Ground Post	$ 6,130	504	F	F	F	F
PlayShade	ZZPSH006	Hip 10'x20'x12' - Recessed Base Plate	$ 6,721	504	F	F	F	F
PlayShade	ZZPSH007	Hip 15'x25'x8' - In-Ground Post	$ 6,539	501	F	F	F	F
PlayShade	ZZPSH008	Hip 15'x25'x8' - Recessed Base Plate	$ 7,130	501	F	F	F	F
PlayShade	ZZPSH009	Hip 15'x25'x10' - In-Ground Post	$ 6,680	501	F	F	F	F
PlayShade	ZZPSH010	Hip 15'x25'x10' - Recessed Base Plate	$ 7,272	501	F	F	F	F
PlayShade	ZZPSH011	Hip 15'x25'x12' - In-Ground Post	$ 6,822	548	F	F	F	F
PlayShade	ZZPSH012	Hip 15'x25'x12' - Recessed Base Plate	$ 7,413	548	F	F	F	F
PlayShade	ZZPSH013	Hip 18'x36'x8' - In-Ground Post	$ 8,878	1,024	F	F	F	F
PlayShade	ZZPSH014	Hip 18'x36'x8' - Recessed Base Plate	$ 9,382	1,024	F	F	F	F
PlayShade	ZZPSH015	Hip 18'x36'x10' - In-Ground Post	$ 9,094	1,024	F	F	F	F
PlayShade	ZZPSH016	Hip 18'x36'x10' - Recessed Base Plate	$ 9,603	1,024	F	F	F	F
PlayShade	ZZPSH017	Hip 18'x36'x12' - In-Ground Post	$ 9,316	1,099	F	F	F	F
PlayShade	ZZPSH018	Hip 18'x36'x12' - Recessed Base Plate	$ 9,827	1,099	F	F	F	F
PlayShade	ZZPSH019	Hip 20'x24'x8' - In-Ground Post	$ 7,512	601	F	F	F	F
PlayShade	ZZPSH020	Hip 20'x24'x8' - Recessed Base Plate	$ 8,083	601	F	F	F	F
PlayShade	ZZPSH021	Hip 20'x24'x10' - In-Ground Post	$ 7,674	601	F	F	F	F
PlayShade	ZZPSH022	Hip 20'x24'x10' - Recessed Base Plate	$ 8,245	601	F	F	F	F
PlayShade	ZZPSH023	Hip 20'x24'x12' - In-Ground Post	$ 7,836	655	F	F	F	F
PlayShade	ZZPSH024	Hip 20'x24'x12' - Recessed Base Plate	$ 8,406	655	F	F	F	F
PlayShade	ZZPSH025	Hip 20'x30'x8' - In-Ground Post	$ 8,109	621	F	F	F	F
PlayShade	ZZPSH026	Hip 20'x30'x8' - Recessed Base Plate	$ 8,679	621	F	F	F	F
PlayShade	ZZPSH027	Hip 20'x30'x10' - In-Ground Post	$ 8,271	621	F	F	F	F
PlayShade	ZZPSH028	Hip 20'x30'x10' - Recessed Base Plate	$ 8,841	621	F	F	F	F
PlayShade	ZZPSH029	Hip 20'x30'x12' - In-Ground Post	$ 8,432	675	F	F	F	F
PlayShade	ZZPSH030	Hip 20'x30'x12' - Recessed Base Plate	$ 9,004	675	F	F	F	F
PlayShade	ZZPSH031	Hip 20'x34'x8' - In-Ground Post	$ 9,027	1,036	F	F	F	F
PlayShade	ZZPSH032	Hip 20'x34'x8' - Recessed Base Plate	$ 9,537	1,036	F	F	F	F
PlayShade	ZZPSH033	Hip 20'x34'x10' - In-Ground Post	$ 9,249	1,036	F	F	F	F
PlayShade	ZZPSH034	Hip 20'x34'x10' - Recessed Base Plate	$ 9,760	1,036	F	F	F	F
PlayShade	ZZPSH035	Hip 20'x34'x12' - In-Ground Post	$ 9,471	1,110	F	F	F	F
PlayShade	ZZPSH036	Hip 20'x34'x12' - Recessed Base Plate	$ 9,982	1,110	F	F	F	F
PlayShade	ZZPSH037	Hip 24'x30'x8' - In-Ground Post	$ 9,315	934	F	F	F	F
PlayShade	ZZPSH038	Hip 24'x30'x8' - Recessed Base Plate	$ 9,848	934	F	F	F	F
PlayShade	ZZPSH039	Hip 24'x30'x10' - In-Ground Post	$ 9,514	934	F	F	F	F
PlayShade	ZZPSH040	Hip 24'x30'x10' - Recessed Base Plate	$ 10,047	934	F	F	F	F
PlayShade	ZZPSH041	Hip 24'x30'x12' - In-Ground Post	$ 9,712	1,001	F	F	F	F
PlayShade	ZZPSH042	Hip 24'x30'x12' - Recessed Base Plate	$ 10,246	1,001	F	F	F	F
PlayShade	ZZPSH043	Hip 24'x40'x8' - In-Ground Post	$ 10,208	1,127	F	F	F	F
PlayShade	ZZPSH044	Hip 24'x40'x8' - Recessed Base Plate	$ 10,718	1,127	F	F	F	F
PlayShade	ZZPSH045	Hip 24'x40'x10' - In-Ground Post	$ 10,430	1,127	F	F	F	F
PlayShade	ZZPSH046	Hip 24'x40'x10' - Recessed Base Plate	$ 10,940	1,127	F	F	F	F
PlayShade	ZZPSH047	Hip 24'x40'x12' - In-Ground Post	$ 10,652	1,201	F	F	F	F
PlayShade	ZZPSH048	Hip 24'x40'x12' - Recessed Base Plate	$ 11,162	1,201	F	F	F	F
PlayShade	ZZPSH049	Hip 30'x40'x10' - In-Ground Post	$ 13,964	1,681	F	F	F	F
PlayShade	ZZPSH050	Hip 30'x40'x10' - Recessed Base Plate	$ 14,613	1,681	F	F	F	F
PlayShade	ZZPSH051	Hip 30'x40'x12' - In-Ground Post	$ 14,411	1,806	F	F	F	F
PlayShade	ZZPSH052	Hip 30'x40'x12' - Recessed Base Plate	$ 15,060	1,806	F	F	F	F
PlayShade	ZZPSH053	Hip Quick Release 10'x20'x8' - In-Ground Post	$ 6,470	366	F	F	F	F
PlayShade	ZZPSH054	Hip Quick Release 10'x20'x8' - Recessed Base Plate	$ 7,060	366	F	F	F	F
PlayShade	ZZPSH055	Hip Quick Release 10'x20'x10' - In-Ground Post	$ 6,611	457	F	F	F	F
PlayShade	ZZPSH056	Hip Quick Release 10'x20'x10' - Recessed Base Plate	$ 7,201	475	F	F	F	F
PlayShade	ZZPSH057	Hip Quick Release 10'x20'x12' - In-Ground Post	$ 6,753	504	F	F	F	F
PlayShade	ZZPSH058	Hip Quick Release 10'x20'x12' - Recessed Base Plate	$ 7,343	504	F	F	F	F
PlayShade	ZZPSH059	Hip Quick Release 15'x25'x8' - In-Ground Post	$ 7,162	501	F	F	F	F
PlayShade	ZZPSH060	Hip Quick Release 15'x25'x8' - Recessed Base Plate	$ 7,752	501	F	F	F	F
PlayShade	ZZPSH061	Hip Quick Release 15'x25'x10' - In-Ground Post	$ 7,303	501	F	F	F	F
PlayShade	ZZPSH062	Hip Quick Release 15'x25'x10' - Recessed Base Plate	$ 7,893	501	F	F	F	F
PlayShade	ZZPSH063	Hip Quick Release 15'x25'x12' - In-Ground Post	$ 7,445	548	F	F	F	F
PlayShade	ZZPSH064	Hip Quick Release 15'x25'x12' - Recessed Base Plate	$ 8,036	548	F	F	F	F
PlayShade	ZZPSH065	Hip Quick Release 18'x36'x8' - In-Ground Post	$ 9,453	1,024	F	F	F	F
PlayShade	ZZPSH066	Hip Quick Release 18'x36'x8' - Recessed Base Plate	$ 9,964	1,024	F	F	F	F
PlayShade	ZZPSH067	Hip Quick Release 18'x36'x10' - In-Ground Post	$ 9,675	1,024	F	F	F	F
PlayShade	ZZPSH068	Hip Quick Release 18'x36'x10' - Recessed Base Plate	$ 10,185	1,024	F	F	F	F
PlayShade	ZZPSH069	Hip Quick Release 18'x36'x12' - In-Ground Post	$ 9,898	1,099	F	F	F	F
PlayShade	ZZPSH070	Hip Quick Release 18'x36'x12' - Recessed Base Plate	$ 10,409	1,099	F	F	F	F
PlayShade	ZZPSH071	Hip Quick Release 20'x24'x8' - In-Ground Post	$ 8,075	601	F	F	F	F
PlayShade	ZZPSH072	Hip Quick Release 20'x24'x8' - Recessed Base Plate	$ 8,644	601	F	F	F	F
PlayShade	ZZPSH073	Hip Quick Release 20'x24'x10' - In-Ground Post	$ 8,235	601	F	F	F	F
PlayShade	ZZPSH074	Hip Quick Release 20'x24'x10' - Recessed Base Plate	$ 8,807	601	F	F	F	F
PlayShade	ZZPSH075	Hip Quick Release 20'x24'x12' - In-Ground Post	$ 8,398	655	F	F	F	F
PlayShade	ZZPSH076	Hip Quick Release 20'x24'x12' - Recessed Base Plate	$ 8,969	655	F	F	F	F
PlayShade	ZZPSH077	Hip Quick Release 20'x30'x8' - In-Ground Post	$ 8,671	621	F	F	F	F
PlayShade	ZZPSH078	Hip Quick Release 20'x30'x8' - Recessed Base Plate	$ 9,242	621	F	F	F	F

PlayShade	ZZPSH079	Hip Quick Release 20'x30'x10' - In-Ground Post	$ 8,833	621	F	F	F	F
PlayShade	ZZPSH080	Hip Quick Release 20'x30'x10' - Recessed Base Plate	$ 9,403	621	F	F	F	F
PlayShade	ZZPSH081	Hip Quick Release 20'x30'x12' - In-Ground Post	$ 8,994	675	F	F	F	F
PlayShade	ZZPSH082	Hip Quick Release 20'x30'x12' - Recessed Base Plate	$ 9,565	675	F	F	F	F
PlayShade	ZZPSH083	Hip Quick Release 20'x34'x8' - In-Ground Post	$ 9,609	1,036	F	F	F	F
PlayShade	ZZPSH084	Hip Quick Release 20'x34'x8' - Recessed Base Plate	$ 10,119	1,036	F	F	F	F
PlayShade	ZZPSH085	Hip Quick Release 20'x34'x10' - In-Ground Post	$ 9,831	1,036	F	F	F	F
PlayShade	ZZPSH086	Hip Quick Release 20'x34'x10' - Recessed Base Plate	$ 10,342	1,036	F	F	F	F
PlayShade	ZZPSH087	Hip Quick Release 20'x34'x12' - In-Ground Post	$ 10,053	1,110	F	F	F	F
PlayShade	ZZPSH088	Hip Quick Release 20'x34'x12' - Recessed Base Plate	$ 10,563	1,110	F	F	F	F
PlayShade	ZZPSH089	Hip Quick Release 24'x30'x8' - In-Ground Post	$ 9,939	934	F	F	F	F
PlayShade	ZZPSH090	Hip Quick Release 24'x30'x8' - Recessed Base Plate	$ 10,473	934	F	F	F	F
PlayShade	ZZPSH091	Hip Quick Release 24'x30'x10' - In-Ground Post	$ 10,138	934	F	F	F	F
PlayShade	ZZPSH092	Hip Quick Release 24'x30'x10' - Recessed Base Plate	$ 10,671	934	F	F	F	F
PlayShade	ZZPSH093	Hip Quick Release 24'x30'x12' - In-Ground Post	$ 10,337	1,001	F	F	F	F
PlayShade	ZZPSH094	Hip Quick Release 24'x30'x12' - Recessed Base Plate	$ 10,870	1,001	F	F	F	F
PlayShade	ZZPSH095	Hip Quick Release 24'x40'x8' - In-Ground Post	$ 10,789	1,127	F	F	F	F
PlayShade	ZZPSH096	Hip Quick Release 24'x40'x8' - Recessed Base Plate	$ 11,300	1,127	F	F	F	F
PlayShade	ZZPSH097	Hip Quick Release 24'x40'x10' - In-Ground Post	$ 11,012	1,127	F	F	F	F
PlayShade	ZZPSH098	Hip Quick Release 24'x40'x10' - Recessed Base Plate	$ 11,522	1,127	F	F	F	F
PlayShade	ZZPSH099	Hip Quick Release 24'x40'x12' - In-Ground Post	$ 11,234	1,201	F	F	F	F
PlayShade	ZZPSH100	Hip Quick Release 24'x40'x12' - Recessed Base Plate	$ 11,744	1,201	F	F	F	F
PlayShade	ZZPSH101	Hip Quick Release 30'x40'x10' - In-Ground Post	$ 14,587	1,681	F	F	F	F
PlayShade	ZZPSH102	Hip Quick Release 30'x40'x10' - Recessed Base Plate	$ 15,236	1,681	F	F	F	F
PlayShade	ZZPSH103	Hip Quick Release 30'x40'x12' - In-Ground Post	$ 15,035	1,806	F	F	F	F
PlayShade	ZZPSH104	Hip Quick Release 30'x40'x12' - Recessed Base Plate	$ 15,684	1,806	F	F	F	F
PlayShade	ZZPSH105	Two-Post Hip 10'x16'x8' - In-Ground Post	$ 5,529	650	F	F	F	F
PlayShade	ZZPSH106	Two-Post Hip 10'x16'x8' - Recessed Base Plate	$ 5,617	650	F	F	F	F
PlayShade	ZZPSH107	Two-Post Hip 14'x22'x8' - In-Ground Post	$ 6,010	800	F	F	F	F
PlayShade	ZZPSH108	Two-Post Hip 14'x22'x8' - Recessed Base Plate	$ 6,102	800	F	F	F	F
PlayShade	ZZPSH109	Two-Post Hip Quick Release 10'x16'x8' - In-Ground Post	$ 5,856	650	F	F	F	F
PlayShade	ZZPSH110	Two-Post Hip Quick Release 10'x16'x8' - Recessed Base Plate	$ 5,945	650	F	F	F	F
PlayShade	ZZPSH111	Two-Post Hip Quick Release 14'x22'x8' - In-Ground Post	$ 6,337	800	F	F	F	F
PlayShade	ZZPSH112	Two-Post Hip Quick Release 14'x22'x8' - Recessed Base Plate	$ 6,430	800	F	F	F	F
PlayShade	ZZPSH113	Joined Hip 30'x60'x12' - In-Ground Post	$ 19,738	2,835	F	F	F	F
PlayShade	ZZPSH114	Joined Hip 30'x60'x12' - Recessed Base Plate	$ 20,279	2,729	F	F	F	F
PlayShade	ZZPSH115	Joined Hip Quick Release 30'x60'x12' - In-Ground Post	$ 20,820	2,977	F	F	F	F
PlayShade	ZZPSH116	Joined Hip Quick Release 30'x60'x12' - Recessed Base Plate	$ 21,361	1,865	F	F	F	F
PlayShade	ZZPSM001	Mariner Pyramid 20'x20'x12' - In-Ground Post	$ 14,452	959	F	F	F	F
PlayShade	ZZPSM002	Mariner Pyramid 20'x20'x12' - Recessed Base Plate	$ 14,983	959	F	F	F	F
PlayShade	ZZPSM003	Mariner Pyramid 30'x30'x12' - In-Ground Post	$ 18,068	1,913	F	F	F	F
PlayShade	ZZPSM004	Mariner Pyramid 30'x30'x12' - Recessed Base Plate	$ 18,598	1,913	F	F	F	F
PlayShade	ZZPSP001	Single Post Pyramid 12'x12'x8' - In-Ground Post	$ 4,719	650	F	F	F	F
PlayShade	ZZPSP002	Single Post Pyramid 12'x12'x8' - Recessed Base Plate	$ 4,835	650	F	F	F	F
PlayShade	ZZPSP003	Single Post Pyramid 12'x12'x10' - In-Ground Post	$ 4,784	750	F	F	F	F
PlayShade	ZZPSP004	Single Post Pyramid 12'x12'x10' - Recessed Base Plate	$ 4,900	750	F	F	F	F
PlayShade	ZZPSP005	Single Post Pyramid 14'x14'x8' - In-Ground Post	$ 4,905	750	F	F	F	F
PlayShade	ZZPSP006	Single Post Pyramid 14'x14'x8' - Recessed Base Plate	$ 5,057	750	F	F	F	F
PlayShade	ZZPSP007	Single Post Pyramid 14'x14'x10' - In-Ground Post	$ 4,970	850	F	F	F	F
PlayShade	ZZPSP008	Single Post Pyramid 14'x14'x10' - Recessed Base Plate	$ 5,123	850	F	F	F	F
PlayShade	ZZPSP009	Single Post Pyramid Quick Release 12'x12'x8' - In-Ground Post	$ 5,178	650	F	F	F	F
PlayShade	ZZPSP010	Single Post Pyramid Quick Release 12'x12'x8' - Recessed Base Plate	$ 5,295	650	F	F	F	F
PlayShade	ZZPSP011	Single Post Pyramid Quick Release 12'x12'x10' - In-Ground Post	$ 5,243	750	F	F	F	F
PlayShade	ZZPSP012	Single Post Pyramid Quick Release 12'x12'x10' - Recessed Base Plate	$ 5,360	750	F	F	F	F
PlayShade	ZZPSP013	Single Post Pyramid Quick Release 14'x14'x8' - In-Ground Post	$ 5,365	750	F	F	F	F
PlayShade	ZZPSP014	Single Post Pyramid Quick Release 14'x14'x8' - Recessed Base Plate	$ 5,516	750	F	F	F	F
PlayShade	ZZPSP015	Single Post Pyramid Quick Release 14'x14'x10' - In-Ground Post	$ 5,430	850	F	F	F	F
PlayShade	ZZPSP016	Single Post Pyramid Quick Release 14'x14'x10' - Recessed Base Plate	$ 5,581	850	F	F	F	F
PlayShade	ZZPSP017	Single Post Pyramid Quick Release 16'x16'x8' - In-Ground Post	$ 6,594	950	F	F	F	F
PlayShade	ZZPSP018	Single Post Pyramid Quick Release 16'x16'x8' - Recessed Base Plate	$ 6,761	950	F	F	F	F
PlayShade	ZZPSP019	Single Post Pyramid Quick Release 16'x16'x10' - In-Ground Post	$ 6,752	1,050	F	F	F	F
PlayShade	ZZPSP020	Single Post Pyramid Quick Release 16'x16'x10' - Recessed Base Plate	$ 6,919	1,050	F	F	F	F
PlayShade	ZZPSP026	Pyramid 10'x10'x8' - In-Ground Post	$ 5,287	430	F	F	F	F
PlayShade	ZZPSP027	Pyramid 10'x10'x8' - Recessed Base Plate	$ 5,878	430	F	F	F	F
PlayShade	ZZPSP028	Pyramid 10'x10'x10' - In-Ground Post	$ 5,429	477	F	F	F	F
PlayShade	ZZPSP029	Pyramid 10'x10'x10' - Recessed Base Plate	$ 6,020	477	F	F	F	F
PlayShade	ZZPSP030	Pyramid 14'x14'x8' - In-Ground Post	$ 5,671	466	F	F	F	F
PlayShade	ZZPSP031	Pyramid 14'x14'x8' - Recessed Base Plate	$ 6,261	466	F	F	F	F
PlayShade	ZZPSP032	Pyramid 14'x14'x10' - In-Ground Post	$ 5,812	513	F	F	F	F
PlayShade	ZZPSP033	Pyramid 14'x14'x10' - Recessed Base Plate	$ 6,402	513	F	F	F	F
PlayShade	ZZPSP034	Pyramid 20'x20'x8' - In-Ground Post	$ 7,126	593	F	F	F	F
PlayShade	ZZPSP035	Pyramid 20'x20'x8' - Recessed Base Plate	$ 7,697	593	F	F	F	F
PlayShade	ZZPSP036	Pyramid 20'x20'x10' - In-Ground Post	$ 7,288	647	F	F	F	F
PlayShade	ZZPSP037	Pyramid 20'x20'x10' - Recessed Base Plate	$ 7,858	647	F	F	F	F
PlayShade	ZZPSP038	Pyramid 20'x20'x12' - In-Ground Post	$ 7,449	701	F	F	F	F
PlayShade	ZZPSP039	Pyramid 20'x20'x12' - Recessed Base Plate	$ 8,020	701	F	F	F	F
PlayShade	ZZPSP040	Pyramid 24'x24'x8' - In-Ground Post	$ 8,435	938	F	F	F	F
PlayShade	ZZPSP041	Pyramid 24'x24'x8' - Recessed Base Plate	$ 8,969	938	F	F	F	F
PlayShade	ZZPSP042	Pyramid 24'x24'x10' - In-Ground Post	$ 8,635	1,004	F	F	F	F
PlayShade	ZZPSP043	Pyramid 24'x24'x10' - Recessed Base Plate	$ 9,167	1,004	F	F	F	F
PlayShade	ZZPSP044	Pyramid 30'x30'x10' - In-Ground Post	$ 10,607	1,260	F	F	F	F
PlayShade	ZZPSP045	Pyramid 30'x30'x10' - Recessed Base Plate	$ 11,116	1,260	F	F	F	F
PlayShade	ZZPSP046	Pyramid 30'x30'x12' - In-Ground Post	$ 13,077	1,877	F	F	F	F
PlayShade	ZZPSP047	Pyramid 30'x30'x12' - Recessed Base Plate	$ 13,726	1,877	F	F	F	F
PlayShade	ZZPSP048	Pyramid Quick Release 10'x10'x8' - In-Ground Post	$ 5,910	430	F	F	F	F
PlayShade	ZZPSP049	Pyramid Quick Release 10'x10'x8' - Recessed Base Plate	$ 6,501	430	F	F	F	F
PlayShade	ZZPSP050	Pyramid Quick Release 10'x10'x10' - In-Ground Post	$ 6,051	477	F	F	F	F

PlayShade	ZZPSP051	Pyramid Quick Release 10'x10'x10' - Recessed Base Plate	$ 6,643	477	F	F	F	F
PlayShade	ZZPSP052	Pyramid Quick Release 14'x14'x8' - In-Ground Post	$ 6,292	466	F	F	F	F
PlayShade	ZZPSP053	Pyramid Quick Release 14'x14'x8' - Recessed Base Plate	$ 6,884	466	F	F	F	F
PlayShade	ZZPSP054	Pyramid Quick Release 14'x14'x10' - In-Ground Post	$ 6,434	513	F	F	F	F
PlayShade	ZZPSP055	Pyramid Quick Release 14'x14'x10' - Recessed Base Plate	$ 7,025	513	F	F	F	F
PlayShade	ZZPSP056	Pyramid Quick Release 20'x20'x8' - In-Ground Post	$ 7,688	593	F	F	F	F
PlayShade	ZZPSP057	Pyramid Quick Release 20'x20'x8' - Recessed Base Plate	$ 8,258	593	F	F	F	F
PlayShade	ZZPSP058	Pyramid Quick Release 20'x20'x10' - In-Ground Post	$ 7,849	647	F	F	F	F
PlayShade	ZZPSP059	Pyramid Quick Release 20'x20'x10' - Recessed Base Plate	$ 8,421	647	F	F	F	F
PlayShade	ZZPSP060	Pyramid Quick Release 20'x20'x12' - In-Ground Post	$ 8,012	701	F	F	F	F
PlayShade	ZZPSP061	Pyramid Quick Release 20'x20'x12' - Recessed Base Plate	$ 8,582	701	F	F	F	F
PlayShade	ZZPSP062	Pyramid Quick Release 24'x24'x8' - In-Ground Post	$ 9,059	938	F	F	F	F
PlayShade	ZZPSP063	Pyramid Quick Release 24'x24'x8' - Recessed Base Plate	$ 9,593	938	F	F	F	F
PlayShade	ZZPSP064	Pyramid Quick Release 24'x24'x10' - In-Ground Post	$ 9,258	1,004	F	F	F	F
PlayShade	ZZPSP065	Pyramid Quick Release 24'x24'x10' - Recessed Base Plate	$ 9,792	1,004	F	F	F	F
PlayShade	ZZPSP066	Pyramid Quick Release 30'x30'x10' - In-Ground Post	$ 11,188	1,260	F	F	F	F
PlayShade	ZZPSP067	Pyramid Quick Release 30'x30'x10' - Recessed Base Plate	$ 11,698	1,260	F	F	F	F
PlayShade	ZZPSP068	Pyramid Quick Release 30'x30'x12' - In-Ground Post	$ 13,702	1,877	F	F	F	F
PlayShade	ZZPSP069	Pyramid Quick Release 30'x30'x12' - Recessed Base Plate	$ 14,350	1,877	F	F	F	F
PlayShade	ZZSTPDWGELC	PlayShade Stamped Engineering Drawings (Electronic Copy Only)	$ 541		F	F	F	F
PlayShade	ZZSTPDWGHDC	PlayShade Stamped Engineering Drawings (Hard & Electronic Copies)	$ 866		F	F	F	F

MSP Dealer 2024 PRICING

Effective 5/15/2024

MODEL #	Collection	Product Grouping	DESCRIPTION	WEIGHT	MSRP
CN420D	Heritage	Contemporary	6' Bench - Port./Surf. Mt. - Diamond	172	$ 1,103
CN420P	Heritage	Contemporary	6’ Bench Port./Surf. Mt. - Perforated	195	$ 1,216
CN420R	Heritage	Contemporary	6' Bench - Port./Surf. Mt. - Rib	235	$ 1,225
CN420S	Heritage	Contemporary	6' Bench - Port./Surf. Mt. - Slat	254	$ 1,375
CN425D	Heritage	Contemporary	6' Bench w/o back - Port./Surf. Mt. - Diamond	157	$ 968
CN425P	Heritage	Contemporary	6’ Bench w/o back Port./Surf. Mt. - Perforated	174	$ 1,096
CN425R	Heritage	Contemporary	6' Bench w/o back - Port./Surf. Mt. - Rib	212	$ 1,100
CN425S	Heritage	Contemporary	6' Bench w/o back - Port./Surf. Mt. - Slat	222	$ 1,216
CN430D	Heritage	Contemporary	6' Bench - Inground - Diamond	163	$ 1,083
CN430P	Heritage	Contemporary	6’ Bench - Inground - Perforated	186	$ 1,196
CN430R	Heritage	Contemporary	6' Bench - Inground - Rib	226	$ 1,200
CN430S	Heritage	Contemporary	6' Bench - Inground - Slat	245	$ 1,340
CN435D	Heritage	Contemporary	6' Bench w/o back - Inground - Diamond	159	$ 951
CN435P	Heritage	Contemporary	6’ Bench w/o back - Inground - Perforated	176	$ 1,064
CN435R	Heritage	Contemporary	6' Bench w/o back - Inground - Rib	214	$ 1,073
CN435S	Heritage	Contemporary	6' Bench w/o back - Inground - Slat	224	$ 1,215
CY420D	Heritage	Courtyard	6' Bench - Diamond	124	$ 1,243
CY420P	Heritage	Courtyard	6’ Bench w/back - Perforated	157	$ 1,384
MC104N	Heritage	Signature	Mounting Plate Covers (Set of 4)	5	$ 83
SG106D	Heritage	Signature	6' Table - 2 3/8" Legs - Diamond	225	$ 1,007
SG106G	Heritage	Signature	6' Picnic Table - Recycled Plastic - Portable	267	$ 1,335
SG106P	Heritage	Signature	6' Table - 2 3/8" Legs - Perforated	257	$ 1,177
SG111D	Heritage	Signature	8' Table - 2 3/8" Legs - Diamond	270	$ 1,113
SG111D-Solid	Heritage	Signature	8 Foot Picnic Table - Solid Top / Diamond Seats	286	$ 1,675
SG111G	Heritage	Signature	8' Picnic Table - Recycled Plastic - Portable	287	$ 1,580
SG111P	Heritage	Signature	8' Table - 2 3/8" Legs - Perforated	333	$ 1,303
SG115D	Heritage	Signature	8' ADA Table - 2 3/8" Legs - Diamond	254	$ 1,081
SG115G	Heritage	Signature	8' ADA Picnic Table - Recycled Plastic - Port - Accessible on 1 end	276	$ 1,801
SG115P	Heritage	Signature	8' ADA Table - 2 3/8" Legs - Perforated	308	$ 1,265
SG120D	Heritage	Signature	10' Shelter Table - Diamond	352	$ 1,668
SG135N	Heritage	Signature	Surface Mount Package for 2 3/8" Legs (set of 2)	2	$ 28
SG140D	Heritage	Signature	46" Sq. Table - Diamond	196	$ 1,113
SG140G	Heritage	Signature	Square Table - Recycled Plastic - Portable	322	$ 1,713
SG140P	Heritage	Signature	46" Sq. Table - Perforated	248	$ 1,303
SG145D	Heritage	Signature	46" Oct. Table - Diamond	198	$ 1,244
SG150D	Heritage	Signature	46" Rnd Table - Portable - Diamond	189	$ 1,180
SG150P	Heritage	Signature	46” Rnd Table - Portable - Perforated	224	$ 1,380
SG155D	Heritage	Signature	46" 3 Seat ADA Accessible Table - Diamond	213	$ 1,223
SG155P	Heritage	Signature	46" 3 Seat ADA Accessible Table Perf	245	$ 1,224
SG171D	Heritage	Signature	46" Sq. Children's Table - Diamond	177	$ 1,228
SG171P	Heritage	Signature	46" Sq. Children's Table - Perforated	229	$ 1,437
SG176D	Heritage	Signature	6' Children's Picnic Table - Diamond	142	$ 963
SG176P	Heritage	Signature	6' Children's Picnic Table - Perforated	179	$ 1,127
SG205D	Heritage	Signature	6' Table - Multi Pedestal - Diamond	302	$ 1,296
SG205P	Heritage	Signature	6' Table - Multi Pedestal - Perforated	334	$ 1,516
SG206D	Heritage	Signature	8' Table - Multi Pedestal - Diamond	347	$ 1,433
SG206P	Heritage	Signature	8' Table - Multi Pedestal - Perforated	410	$ 1,677
SG207D	Heritage	Signature	8' ADA Table - Multi Pedestal - Diamond	328	$ 1,395
SG207P	Heritage	Signature	8' ADA Table - Multi Pedestal - Perforated	382	$ 1,632
SG215D	Heritage	Signature	40" Sq. Table - 4 Seats - Ingr. - Basic Frame - Diamond	238	$ 1,352
SG215P	Heritage	Signature	40" Sq. Table - 4 Seats - Ingr. - Basic Frame - Perforated	279	$ 1,581
SG229D	Heritage	Signature	46 Inch Square Table 4 Seats Surf M	384	$ 1,358
SG229G	Heritage	Signature	Square Table 4 Seats - Recycled Plastic - Surface Mount	383	$ 1,972
SG229P	Heritage	Signature	46 Inch Square Table 4 Seats Surf M	385	$ 1,509
SG230D	Heritage	Signature	46" Sq. Table - 4 Seats - Ingr. - Basic Frame - Diamond	243	$ 1,424
SG230G	Heritage	Signature	Square Table - 4 Seats - Recycled Plastic - Inground	369	$ 1,972
SG230P	Heritage	Signature	46" Sq. Table - 4 Seats - Ingr. - Basic Frame - Perforated	295	$ 1,667
SG234D	Heritage	Signature	46 Inch Square Table 3 Seats Surf M	350	$ 1,214
SG234G	Heritage	Signature	Square Table 3 Seats - Recycled Plastic - Surface Mount	349	$ 1,823
SG234P	Heritage	Signature	46 Inch Square Table 3 Seats Surf M	351	$ 1,337

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MODEL #	Collection	Product Grouping	DESCRIPTION	WEIGHT	MSRP
SG235D	Heritage	Signature	46" Sq. Table - 3 Seats - Ingr. - Basic Frame - Diamond	217	$ 1,064
SG235G	Heritage	Signature	Square Table - 3 Seats - Recycled Plastic - Inground	335	$ 1,823
SG235P	Heritage	Signature	46" Sq. Table - 3 Seats - Ingr. - Basic Frame - Perforated	263	$ 1,245
SG240G	Heritage	Signature	Square Table 2 Seats - Recycled Plastic - Inground	291	$ 1,672
SG2448-ADA	Heritage	Signature	4' Bench without back-24" Wide-ADA Acces	114	$ 543
SG244D	Heritage	Signature	46 Inch Round Table 4 Seats Surface Moun	250	$ 1,446
SG244P	Heritage	Signature	46 Inch Round Table 4 Seats Surface Moun	285	$ 1,571
SG245D	Heritage	Signature	46 Inch Round Table 4 Seats Ing Bas	236	$ 1,399
SG245G	Heritage	Signature	Square Table 2 Seats - Recycled Plastic - S.M.	305	$ 1,679
SG245P	Heritage	Signature	46 Inch Round Table 4 Seats Ing B	271	$ 1,520
SG249D	Heritage	Signature	46 Inch Round Table 3 Seats Surf M	223	$ 1,256
SG249P	Heritage	Signature	46 Inch Round Table 3 Seats Surf M	253	$ 1,376
SG250D	Heritage	Signature	46 Inch Round Table 3 Seats Ing B	209	$ 1,217
SG250P	Heritage	Signature	46 Inch Round Table 3 Seats Ing B	239	$ 1,345
SG300D	Heritage	Signature	6' Bench w/back - Portable - Diamond	114	$ 588
SG300P	Heritage	Signature	6' Bench w/back - Portable - Perforated	126	$ 647
SG300PBB	Heritage	Signature	6 Foot "Buddy Bench" with back Portable Perforated	126	$ 640
SG301D	Heritage	Signature	6' Bench w/o back - Portable - Diamond	65	$ 369
SG301G	Heritage	Signature	6' Bench w/back (signature) - Recycled Plastic - Portable	128	$ 807
SG301P	Heritage	Signature	6' Bench w/o back - Portable - Perforated	70	$ 381
SG302G	Heritage	Signature	6' Bench w/out back (signature) - Recycled Plastic - Portable	70	$ 469
SG303D	Heritage	Signature	6' Bench w/back - Inground - Diamond	113	$ 549
SG303G	Heritage	Signature	6' Bench w/back (signature) - Recycled Plastic -In-ground	127	$ 807
SG303P	Heritage	Signature	6' Bench w/back - Inground - Perforated	125	$ 604
SG303PBB	Heritage	Signature	6 Foot "Buddy Bench" with back Inground Perforated	125	$ 600
SG304D	Heritage	Signature	6' Bench w/o back - Inground - Diamond	64	$ 323
SG304G	Heritage	Signature	6' Bench w/out back (signature) - Recycled Plastic - In-ground	69	$ 469
SG304P	Heritage	Signature	6' Bench w/o back - Inground - Perforated	69	$ 355
SG306D	Heritage	Signature	6' Bench w/back - Surface Mount - Diamond	107	$ 549
SG306G	Heritage	Signature	6' Bench w/back (signature) - Recycled Plastic - Surface-mount	121	$ 811
SG306P	Heritage	Signature	6' Bench w/back - Surface Mount - Perforated	119	$ 604
SG306PBB	Heritage	Signature	6 Foot "Buddy Bench" with back Surface Mount Perforated	119	$ 600
SG307D	Heritage	Signature	6' Bench w/o back - Surface Mount - Diamond	58	$ 323
SG307G	Heritage	Signature	6' Bench w/out back (signature) - Recycled Plastic - Surface-mount	63	$ 469
SG307P	Heritage	Signature	6' Bench w/o back - Surface Mount - Perforated	63	$ 353
SG312D	Heritage	Signature	8' Bench w/back - Portable - Diamond	133	$ 653
SG312P	Heritage	Signature	8' Bench w/back - Portable - Perforated	154	$ 719
SG313D	Heritage	Signature	8' Bench w/o back - Portable - Diamond	81	$ 420
SG313P	Heritage	Signature	8' Bench w/o back - Portable - Perforated	90	$ 463
SG315D	Heritage	Signature	8' Bench w/back - Inground - Diamond	132	$ 640
SG315P	Heritage	Signature	8' Bench w/back - Inground - Perforated	153	$ 704
SG316D	Heritage	Signature	8' Bench w/o back - Inground - Diamond	74	$ 373
SG316P	Heritage	Signature	8' Bench w/o back - Inground - Perforated	83	$ 391
SG318D	Heritage	Signature	8' Bench w/back - Surface Mount - Diamond	126	$ 640
SG318P	Heritage	Signature	8' Bench w/back - Surface Mount - Perforated	147	$ 704
SG319D	Heritage	Signature	8' Bench w/o back - Surface Mount - Diamond	68	$ 361
SG319P	Heritage	Signature	8' Bench w/o back - Surface Mount - Perforated	77	$ 397
SG380D	Heritage	Signature	4 Foot Bench without back Surface Mount	38	$ 247
SG406D-ADA	Heritage	Signature	ADA Signature Surface Mount Bench - X.M.	186	$ 815
SP405P	Heritage	Contemporary	6' Bench w/bck -Port/SM-Perf- Memorial	178	$ 1,209
SP406P	Heritage	Contemporary	6' Bench w/bck -Inground-Perf- Memorial	169	$ 1,182
SP410P	Heritage	Courtyard	6' Bench w/bck -Port/SM-Perf- Memorial	140	$ 1,321
SY135D	Heritage	Spyder	7' Picnic Table - Port./Surf. Mount - Diamond	274	$ 1,557
SY135P	Heritage	Spyder	7' Picnic Table - Port./Surf. Mount - Perforated	311	$ 1,713
SY225D	Heritage	Spyder	7' Picnic Table - Inground - Diamond	303	$ 1,697
CN420G	Urbanscape	Camden	6' Bench w/back - Recycled Plastic -Portable	160	$ 1,343
CN430G	Urbanscape	Camden	6' Bench w/back - Recycled Plastic - Inground	150	$ 1,311
CO1119C	Urbanscape	Covington	6' Bench w/back, w/arms - horizontal slat - port/sm	108	$ 1,533
FA100N	Urbanscape	Fairmount	PARK BENCH PORT BLACK	102	$ 1,399
FA120N	Urbanscape	Fairmount	TABLE ROUND MINI PORTABLE BLACK	46	$ 921

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MODEL #	Collection	Product Grouping	DESCRIPTION	WEIGHT	MSRP
FA140N	Urbanscape	Fairmount	STOOL 45 DEG INGROUND BLACK	17	$ 533
FA160N	Urbanscape	Fairmount	STOOL 45 DEG PORT BLACK	8	$ 612
FA180N	Urbanscape	Fairmount	CURVED 90 DEG BENCH PORT BLACK	35	$ 999
FA200N	Urbanscape	Fairmount	CURVED 360 DEG BENCH INGROUND BLACK	155	$ 4,099
FA220N	Urbanscape	Fairmount	CURVED 360 DEG BENCH PORTABLE BLACK	335	$ 4,699
FA240N	Urbanscape	Fairmount	PARK BENCH 90 DEG CURVED PORT BLACK	22	$ 599
FA260N	Urbanscape	Fairmount	STOOL 45 DEG PORT BLACK	15	$ 669
FA280N	Urbanscape	Fairmount	BENCH CURVED 90 DEG INGROUND BLACK	57	$ 599
FA300N	Urbanscape	Fairmount	BENCH CURVED 90 DEG PORT BLACK	59	$ 1,399
FA320N	Urbanscape	Fairmount	BENCH CURVED 360 DEG INGROUND BLACK	203	$ 4,699
FA340N	Urbanscape	Fairmount	BENCH CURVED 360 DEG PORT BLACK	251	$ 5,199
FA360N	Urbanscape	Fairmount	BAR TABLE INGROUND BLACK	45	$ 799
FA380N	Urbanscape	Fairmount	BAR TABLE SURFACE MOUNT BLACK	48	$ 899
FA400N	Urbanscape	Fairmount	BAR STOOL SURFACE MOUNT BLACK	23	$ 599
FA420N	Urbanscape	Fairmount	BAR SET (4 STOOLS) SURFACE MOUNT BLACK	138	$ 2,999
FA440N	Urbanscape	Fairmount	PARK BENCH FAIRMOUNT INGROUND BLACK	66	$ 1,099
FA460N	Urbanscape	Fairmount	RECTANGLE TABLE PORTABLE BLACK	80	$ 1,199
FA480N	Urbanscape	Fairmount	BENCH PORTABLE BLACK	50	$ 899
GV2O72P	Urbanscape	Green Valley	30" x 24" Rectangular Table - Recycled Plastic - Portable	33	$ 463
GV2V72P	Urbanscape	Green Valley	36" Square Table - Recycled Plastic - Portable	52	$ 651
GV2V72P-P	Urbanscape	Green Valley	36" Square Table - Premium Recycled Plastic - Portable	53	$ 645
GV2X72P	Urbanscape	Green Valley	30" Square Table - Recycled Plastic - Portable	38	$ 525
GV2Y72P	Urbanscape	Green Valley	48" Square Table - Recycled Plastic - Portable	74	$ 883
GV2Z72P	Urbanscape	Green Valley	30" x 48" Rectangular Table - Recycled Plastic - Portable	50	$ 645
GV9112P	Urbanscape	Green Valley	Dining Chair with arms - Recycle Slat	19	$ 260
GV9112P-P	Urbanscape	Green Valley	Dining Chair with arms - Premium Recycle Slat	20	$ 258
GV9122P	Urbanscape	Green Valley	Dining Chair without arms - Recycle Slat	18	$ 253
GVA5E2P	Urbanscape	Green Valley	30" x 72" Community Table - Portable/Surface Mount	80	$ 908
GVAV72P	Urbanscape	Green Valley	36" Square Bar Table - Recycle Slat - Portable	56	$ 700
GVAX72P	Urbanscape	Green Valley	30" Square Bar Table - Recycle Slat - Portable	42	$ 583
GVB122P	Urbanscape	Green Valley	Bar Chair - Recycle Slat	22	$ 401
HA2I77P	Urbanscape	Hanna	36" Round Table - Pedestal - Solid - Por	77	$ 749
HA2I79P	Urbanscape	Hanna	36" Round Table - Pedestal - Horizontal	77	$ 849
HA2V79P	Urbanscape	Hanna	36" Square Table - Pedestal - Horizontal	77	$ 789
HA2Z79P	Urbanscape	Hanna	30" x 48" Rectangle Table - Pedestal - H	80	$ 889
HA9119P	Urbanscape	Hanna	Arm Chair - Slat Single	11	$ 199
HA911AP	Urbanscape	Hanna	Arm Chair - Large Square Perf-Single	11	$ 229
HA9121P	Urbanscape	Hanna	Dining Chair - w/o arms-Sq Perf Single	11	$ 249
HA9129P	Urbanscape	Hanna	Chair without arms - Slat Single	11	$ 199
HAA5E7P	Urbanscape	Hanna	30" x 72" Community Table - Solid - Bar	158	$ 1,599
HAA5E9P	Urbanscape	Hanna	30" x 72" Community Table - Horizontal S	158	$ 1,599
HAAI77P	Urbanscape	Hanna	36" Round Bar Table - Pedestal - Solid -	77	$ 749
HAAI79P	Urbanscape	Hanna	36" Round Bar Table - Pedestal - Horizon	77	$ 849
HAB121P	Urbanscape	Hanna	Bar Chair - with back - without arms - S	17	$ 249
HL36R	Urbanscape	Highland	36" Round Table - Steel Mesh - Black Powder Coated Black	25	$ 137
HL36S	Urbanscape	Highland	36" Square Table - Steel Mesh -Black Powder Coated Black	25	$ 140
HL48R	Urbanscape	Highland	48" Round Table - Steel Mesh - Black Powder Coated Black	25	$ 196
HLCHR	Urbanscape	Highland	Chair - Steel Mesh-Black powder coat	25	$ 351
LB105N	Urbanscape	Liberty	CYCLE RACK	37	$ 381
LB120N	Urbanscape	Liberty	TRELLIS SQUARE	10	$ 685
LB140N	Urbanscape	Liberty	TRELLIS HEXAGONAL SMALL	94	$ 689
LB160N	Urbanscape	Liberty	TRELLIS HEXAGONAL LARGE	161	$ 1,202
LB180N	Urbanscape	Liberty	EXTENTION MODULE SQUARE	55	$ 422
LB200N	Urbanscape	Liberty	EXTENTION MODULE HEXAGONAL SMALL	48	$ 402
LB220N	Urbanscape	Liberty	EXTENTION MODULE HEXAGONAL LARGE	103	$ 569
LB240N	Urbanscape	Liberty	PLANTER RECTANGULAR	69	$ 533
LB260N	Urbanscape	Liberty	PLANTER HEXAGONAL SMALL	63	$ 606
LB280N	Urbanscape	Liberty	PLANTER HEXAGONAL LARGE	121	$ 976
LB300N	Urbanscape	Liberty	ARMREST FOR BENCH	17	$ 107
LB320N	Urbanscape	Liberty	TABLE	79	$ 1,599

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MODEL #	Collection	Product Grouping	DESCRIPTION	WEIGHT	MSRP
LB340N	Urbanscape	Liberty	BENCH W/ONE LEG/ARMREST	123	$ 1,599
LB360N	Urbanscape	Liberty	TRASH RECEPTACLE PAPER	189	$ 2,187
LB365N	Urbanscape	Liberty	TRASH RECEPTACLE PLASTIC	189	$ 2,187
LB370N	Urbanscape	Liberty	TRASH RECEPTACLE GLASS	189	$ 2,187
LB375N	Urbanscape	Liberty	TRASH RECEPTACLE METAL	189	$ 2,187
LB380N	Urbanscape	Liberty	LARGE HEX PLANTER SEAT	56	$ 1,899
LB400N	Urbanscape	Liberty	SEAT SQUARE	28	$ 699
LB420N	Urbanscape	Liberty	WOOD FRAME SQUARE	20	$ 599
LB440N	Urbanscape	Liberty	SEAT HEXAGON SMALL	56	$ 999
LB460N	Urbanscape	Liberty	WOOD FRAME HEXAGON SMALL	18	$ 449
LB480N	Urbanscape	Liberty	WOOD FRAME HEXAGON LARGE	22	$ 899
LB500N	Urbanscape	Liberty	BENCH W/MICRO TABLE	15	$ 229
LB520N	Urbanscape	Liberty	BENCH	106	$ 2,799
LB540N	Urbanscape	Liberty	BENCH (ONE LEG, PLANTER OR EXTENTION)	110	$ 1,399
LB560N	Urbanscape	Liberty	SOFA	112	$ 1,499
LB580N	Urbanscape	Liberty	SOFA (ONE LEG, PLANTER OR EXTENTION)	127	$ 1,999
OX1113C	Urbanscape	Oxford	6' Bench w/back, w/arms - Slat - port/sm	136	$ 2,035
OX1119C	Urbanscape	Oxford	6' Bench w/back, w/arms - Horizontal Slat - port/sm	117	$ 1,863
SU2G38P	Urbanscape	Sullivan	48" round Table - Mesh - Portable	31	$ 381
SU2H38P	Urbanscape	Sullivan	42" Round table - Mesh - Portable	27	$ 325
SU2I38P	Urbanscape	Sullivan	36" Round table - Mesh - Portable	24	$ 280
SU2V38P	Urbanscape	Sullivan	36" Square table - Mesh - Portable	26	$ 281
SU2W38P	Urbanscape	Sullivan	42" Square table - Mesh - Portable	31	$ 325
SU2X38P	Urbanscape	Sullivan	30" Square Table - Mesh - portable	21	$ 269
SU2Z38P	Urbanscape	Sullivan	30 x 48 Table - Portable	30	$ 333
SU9118P	Urbanscape	Sullivan	Arm Chair - Mesh	11	$ 141
WO1119S	Urbanscape	Woodridge	6' Bench w/back, w/arms - Horizontal Slat - sm	140	$ 1,737
WO1419S	Urbanscape	Woodridge	6' Bench w/o back, w/arms - Horizontal Slat - sm	124	$ 1,647
YO1113C	Urbanscape	Yorktown	6' Bench w/back, w/arms - slat - port/sm	74	$ 1,164
YO1213C	Urbanscape	Yorktown	6' Bench arch back, w/arms - slat - port/sm	79	$ 1,201
YO1313C	Urbanscape	Yorktown	6' Bench chippendale, w/arms - slat - port/sm	87	$ 1,292
YO2G33C	Urbanscape	Yorktown	48" Round Table - Slat - port/sm	55	$ 919
YO2K33C	Urbanscape	Yorktown	36" x 72" Rect Table - Slat - port/sm	70	$ 1,081
YO3F33C	Urbanscape	Yorktown	Yorktown Receptacle - slat - port surf mt	76	$ 1,363
YO9113C	Urbanscape	Yorktown	Chair - Slat - port/sm	48	$ 727
10547P	Accessories	Ash and Trash	PF- Paper Towel Rod Kit	1	$ 52
10553P	Accessories	Ash and Trash	PF Double Paper Towel Bracket for Dispen	20	$ 257
AU100D-PF	Accessories	Ash and Trash	Ash Urn Diamond No Tabs or Ash Tray	26	$ 188
BRH538I	Accessories	Bike Racks	Bike Loop - Ingr	25	$ 147
BRH538S	Accessories	Bike Racks	Bike Loop - sm	34	$ 173
BRH539I	Accessories	Bike Racks	Inverted U Bike Rack – Inground Stainless Steel	34	$ 391
BRH539S	Accessories	Bike Racks	Inverted U Bike Rack – Surface Mount Stainless Steel	34	$ 363
BRH540I	Accessories	Bike Racks	Inverted U Bike Rack - Inground	34	$ 211
BRH540S	Accessories	Bike Racks	Inverted U Bike Rack – Surface Mount	34	$ 196
BRH541I	Accessories	Bike Racks	Bike Rack Circular Stainless Steel - Inground	34	$ 487
BRH541S	Accessories	Bike Racks	Bike Rack Circular Stainless Steel - Surface Mount	34	$ 453
BRH542I	Accessories	Bike Racks	Bike Rack Circular -Inground	34	$ 244
BRH542S	Accessories	Bike Racks	Bike Rack Circular - Surface Mount	34	$ 276
BRH543I	Accessories	Bike Racks	Open Circular Bike Rack -Inground Stainless Steel	34	$ 388
BRH543S	Accessories	Bike Racks	Open Circular Bike Rack -Surface Mount Stainless Steel	34	$ 363
BRH544I	Accessories	Bike Racks	Open Circular Bike Rack -Inground	34	$ 148
BRH544S	Accessories	Bike Racks	Open Circular Bike Rack -Surface Mount	34	$ 139
BRH545I	Accessories	Bike Racks	Designer Bike Rack – Inground Stainless Steel	34	$ 520
BRH545S	Accessories	Bike Racks	Designer Bike Rack – Surface Mount Stainless Steel	34	$ 487
BRH546I	Accessories	Bike Racks	Designer Bike Rack – Inground Stainless	34	$ 225
BRH546S	Accessories	Bike Racks	Designer Bike Rack – Surface Mount Stainless	34	$ 211
BRI538P	Accessories	Bike Racks	8 Bike Rack – Double Sided	69	$ 677
BRI538P-PF	Accessories	Bike Racks	Bike Rack 48"PF- Portable	69	$ 568
BRK534S	Accessories	Bike Racks	5 Loop/7 Bike Rack - Serpentine - Surface-Mount	43	$ 435
BRK538I	Accessories	Bike Racks	Bike Rack - Serpentine - In-ground	43	$ 307

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MODEL #	Collection	Product Grouping	DESCRIPTION	WEIGHT	MSRP
BRK538S	Accessories	Bike Racks	Bike Rack - Serpentine - Surface-mount	48	$ 397
DT100N	Accessories	Ash and Trash	Dome Top Lid	12	$ 143
DT101N	Accessories	Ash and Trash	Recycle Dome Top Lid	7	$ 145
FT100N	Accessories	Ash and Trash	Flat Top Lid - 8" Dia. Inward Opening	9	$ 124
FT106N	Accessories	Ash and Trash	Recycle Flat top Lid - 5" Dia. Outward Slope	7	$ 155
FT110N	Accessories	Ash and Trash	Flat Top Lid - 14" Dia. Opening	8	$ 124
FT116N	Accessories	Ash and Trash	Flat-top with solid bonnet for 55-gallon receptacle	16	$ 207
GR100N	Accessories	Grill	Pedestal Grill - 300 sq. inches - Adjustable & Flipable Grate - In-ground	79	$ 553
GR101N	Accessories	Grill	Pedestal Grill - 300 sq. inches - Adjustable Only Grate - In-ground	79	$ 400
GR102N	Accessories	Grill	Group Grill - Surface Mount	246	$ 1,009
GR103N	Accessories	Grill	Fire Ring with Tilt Back Staples	86	$ 463
GR104N	Accessories	Grill	Group Grill w/ 1 Side Shelf - Surface Mount	460	$ 2,033
GR105N	Accessories	Grill	Covered Grill - 500 sq. inches	188	$ 1,009
GR106N	Accessories	Grill	Fire Ring with Spade Anchors	95	$ 411
LR100N	Accessories	Ash and Trash	Inground Post Package	12	$ 93
LR105N	Accessories	Ash and Trash	Surface Mount Post Package	12	$ 89
LR200D	Accessories	Ash and Trash	22 Gallon Receptacle - Diamond	57	$ 344
LR210N	Accessories	Ash and Trash	22 Gallon Liner	4	$ 39
LR300D	Accessories	Ash and Trash	32 Gallon Receptacle - Diamond	67	$ 357
LR300G	Accessories	Ash and Trash	32 Gallon Receptaclew/ liner - Recycled Plastic - Portable	55	$ 693
LR300P	Accessories	Ash and Trash	32 Gallon Receptacle - Perforated	85	$ 500
LR300R	Accessories	Ash and Trash	32 Gallon Receptacle - Rib	106	$ 505
LR300S	Accessories	Ash and Trash	32 Gallon Receptacle - Slat	175	$ 659
LR305P	Accessories	Ash and Trash	32 Gallon Receptacle w/ Door - Perforated	111	$ 729
LR310N	Accessories	Ash and Trash	32 Gallon Liner	5	$ 45
LR355P	Accessories	Ash and Trash	55 Gallon Receptacle - Perforated	120	$ 551
LR400G	Accessories	Ash and Trash	32 Gallon Receptacle w/ liner - Recycled Plastic - Inground	67	$ 696
LR510N	Accessories	Ash and Trash	55 Gallon Liner	14	$ 166
PTD100-DBL	Accessories	Ash and Trash	Paper Towel Bracket for Dispenser-Double	29	$ 235
PTD200-Single	Accessories	Ash and Trash	Paper Towel Bracket for Dispenser-Single	20	$ 185
SB100N	Accessories	Ash and Trash	Flat Top Solid Bonnet - Inward Opening	16	$ 167
SB100N-PF	Accessories	Ash and Trash	PF-Flat Top Solid Bonnet w/Paper Towel R	17	$ 175
TB100N	Accessories	Ash and Trash	Flat Top w/ Tray Bonnet	21	$ 248
UM100NA	Accessories	Umbrella	7.5" Garden Umbrella- Crank Lift	15	$ 213
UM105A	Accessories	Umbrella	7' MARK UM -A GRD FAB CRANK LIFT	19	$ 439
UM105B	Accessories	Umbrella	7' MARK UM -B GRD FAB CRANK LIFT	19	$ 483
UM106A	Accessories	Umbrella	7' MAR UMB MAN LIFT PL-A GRD FAB	19	$ 439
UM106B	Accessories	Umbrella	7' MAR UMB MAN LIFT PL-B GRD FAB	19	$ 483
UM107A	Accessories	Umbrella	7' MARK UM PULLEY PIN POLE-A GRD FAB	19	$ 496
UM107B	Accessories	Umbrella	7' MARK UM PULLEY PIN POLE-B GRD FAB	19	$ 537
UM110A	Accessories	Umbrella	9' MARK UM - CRANK A GRD FAB	22	$ 520
UM110B	Accessories	Umbrella	9' MARK UM - CRANK B GRD FAB	22	$ 564
UM112A	Accessories	Umbrella	9' MARK UM PULLEY PIN - A GRD FAB	22	$ 539
UM112B	Accessories	Umbrella	9' MARK UM PULLEY PIN - B GRD FAB	22	$ 583
UM115A	Accessories	Umbrella	9' MARK 1-PC PUSH UP UM - A GRD FAB	28	$ 720
UM115B	Accessories	Umbrella	9' MARK 1-PC PUSH UP UM - B GRD FAB	28	$ 764
UM120A	Accessories	Umbrella	6-RIB QS UM TERR - A GRD FAB	17	$ 249
UM130P	Accessories	Umbrella	Aluminum Umbrella W/Silver Pole Perf	85	$ 1,594
UM300N	Accessories	Umbrella	Aluminum Terrace Shell	4	$ 67
UM305N	Accessories	Umbrella	Market Umbrella Stand	47	$ 216
UM310	Accessories	Umbrella	MARK UM STAND 23" ALUMCONCRETE FILL 115L	115	$ 345
UM315	Accessories	Umbrella	MARK UM STND 23" ALM W/WHLS CNCRT FL 115	115	$ 464
UM320	Accessories	Umbrella	MARK UM STAND 23" ALUMCONCRETE FILL 160L	160	$ 399
UMC532A	Accessories	Umbrella	9' MARK UM NAT W/FX-WD PL-A GRD FAB	32	$ 917
UMC532B	Accessories	Umbrella	9' MARK UM NAT W/FX-WD PL-B GRD FAB	32	$ 961

City of Tampa
Jane Castor, Mayor

Purchasing Department
Deanna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E. Hanna Ave.
Tampa, Florida 33610
Office: (813) 274-8351
Fax: (813) 274-8355

M E M O R A N D U M

DATE: July 17, 2024

TO: Lisa Grizzle
Parks & Recreation Administrative Manager
Parks and Recreation

FROM: Theresa Samuel, Purchasing Technician

RE: **REQUEST FOR RENEWAL/RE-BID**

The award for **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421** provided by **REP SERVICES, INC.** will expire on **JANUARY 12, 2025**. This award has a one-year renewal period. Per the terms of the contract, the vendor is entitled to request a **3.0%** escalation using the Consumer Price Index.

We are requesting information from you as to your needs relative to renewing the award for the above referenced goods. Please indicate your preference with an **(X)**, for one of the options listed below.

__x__ 1.You want to renew with the current vendor(s). ***Please attach to the Request for Renewal/Re-bid form an explanation as to why it is in the best interest of the Department to Re-new rather than Re-bid. Include a statement that the current pricing has been reviewed and remains fair and reasonable. The information that you provide will appear in the background section of the agenda request form that will appear before City Council. Please submit the MBD-30 payment form (if applicable) to this renewal. The MBD-30 form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the evaluation period.***

a.__x__ Please complete the attached **Vendor Performance Evaluation** form.

b._____ Please complete the attached **MBD-30 Sub-Contractor Payment** form **(if applicable for this renewal).**

	ESTIMATED EXPENDITURE	FUND	COST CENTER	ACCOUNT
FY_____	__Controlled by requisition_____			
FY_____	_____			

(If funds are to be split between two fiscal years, please indicate the years and amounts)

____ 2. You do not want to renew with this vendor and would like to Re-bid. **Please provide an explanation:**

_____

_____

____ 3.You do not want to renew or re-bid at this time. (Let contract expire).

Please return this document and the requested information to my office by **July 23, 2024,** in order that we may process your request in a timely manner.

Dept. Contact Name (Printed): _Danielle Riffenburg_____ **Signature:** _____ **Date:** _____

Please fax to 813-274-8355 or email to theresa.samuel@tampagov.net

VENDOR PERFORMANCE EVALUATION

Name of Vendor Reviewed:	REP SERVICES, INC.	
Contract Name & Number:	PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421	
Rating Period	**From: 1/13/24**	**To: Present**

	Place an X for your selection	**Excellent**	**Satisfactory**	**Unsatisfactory**
Delivery/Service completed when required:	Delivered/Service as ordered and to spec?		x	
	Timeliness of Product/Service		x	
	Quality of Product/Service		x	
	Delivery of Products/ Complete/ Undamaged?		X	

Please Describe Quality of Product or Service: Products quality is as expected and the vendor is responsive.

	Communication (Phone, E-Mail, or Fax availability)?		x	
	Responsiveness and proper follow up regarding any contractual or performance issues?		x	
Customer Satisfaction	Product or Services fulfilled/completed		x	

Have you discussed issues with vendor? ____x____ Yes _____ No

Would you like to request a meeting with Purchasing & Vendor? _____Yes ___x____ No

Performance during rating period: Delivery and shipping issues have been addressed in a timely manner.

Customer Service Comments: Any issues have been addressed in a timely manner.

Dept. Contact Name (Printed): _Danielle Riffenburg_____ **Signature:** Danielle Riffenburg Digitally signed by Danielle Riffenburg Date: 2024.08.29 15:36:51 -04'00'

Rev: 4/20/11

PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

REP SERVICES, INC.

Parks and Recreation believes it is in the best interest of the City to renew the contract for Bid #31041421 with REP SERVICES, INC. Maintaining the current contract will allow for efficient maintenance and repair of existing and new equipment installed under this contract. The current pricing has been reviewed and remains fair and reasonable.

City of Tampa
Jane Castor, Mayor

Purchasing Department
DeAnna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E Hanna Avenue
Tampa, Florida 33610

Office (813) 274-8351
Fax: (813) 274-8355

September 13, 2024

Nathan Almon
Rep Services, Inc
165 W. Jessup Ave.
Longwood, FL 32750
sales@repservices.com

Dear Mr. Almon:

Your firm has an award with the City of Tampa to provide **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421**

This existing award expires on **JANUARY 12, 2025**. Under the provisions of this award, terms and conditions may be renewed if mutually agreeable to both parties for an additional **one-year** period.

If your firm desires to renew the award, please complete and return the following:

- Statement of Intent
- Form MBD10 – "Schedule of All Sub-Contractors/Consultants/Suppliers Solicited"
- Form MBD20 – "Schedule of Sub-Contractors/Consultants/Suppliers to be Utilized"
- Form MBD50 – "Good Faith Effort Compliance Plan (GFECP) Guidelines"
- Form MBD30 – "Sub-Contractors/Consultant/Suppliers Payments"
- Affidavit of Compliance:
    - FS287.138 Compliance with Foreign Countries of Concern
    - FS287.133 Convicted Vendor List (Public Entity Crimes)
    - FS287.135 Prohibition Against Contracting with Scrutinized Companies
    - FS787.06 Prohibition Against Human Trafficking
    - FS448.095 Compliance With E-Verify

If your firm desires to renew the award, please complete and return the above listed documents. The MBD forms should document any subcontractors that are going to be used to provide goods/services for the award's renewal period and/or if any request for payments has been submitted. If payments were not requested or subcontractors were not used, please mark each form accordingly. **All documents must be submitted for the award/contract to be renewed.**

If you do not wish to renew, please indicate so on the attached Statement of Intent.

Sincerely,

Theresa Samuel
Purchasing Technician
(813) 274-8635
theresa.samuel@tampagov.net

STATEMENT OF INTENT

I, Bill Geary,

being authorized to contract for Rep Services, Inc., do hereby express the firm's desire to renew the above referenced agreement upon the same prices, same terms and conditions. I understand that an extension of the agreement requires the City's approval. This statement represents the above firm's binding approval of an extension of this agreement.

By:  10/7/2024
Authorized Signature Date

Bill Geary
Type or Print Name Above

Title: Vice President

Comments:

( ) We do not wish to renew this award. The source for non-renewal is:

By: _____ _____
Authorized Signature Date

_____
Type or Print Name Above

Title: _____

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules
City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)
(FORM MBD-10)

Contract No.: 21-P-00417 Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

Company Name: Rep Services, Inc. Address: 165 W. Jessup Avenue, Longwood, FL 32750

Federal ID: 59-2978507 Phone: 407-831-9658 Fax: 866-232-8532 Email: bill@repservices.com

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.

☑ **No Firms were contacted or solicited for this contract.**

☐ **No Firms were contacted because:** _____

☐ **See attached list of additional Firms solicited and all supplemental information (List must comply to this form)**

Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=W/MBE O = Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub–contracting opportunities on this contract.

Signed: Bill Geary Name/Title: Vice President Date: 10/7/2024

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

Page 2 of 4 – DMI Solicited/Utilized
Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) Solicited Form
(Form MBD-10)

This form must be submitted with all bids or proposals. **All** subcontractors (regardless of ownership or size) solicited and subcontractors from whom unsolicited quotations were received must be included on this form. The instructions that follow correspond to the headings on the form required to be completed. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Firms were contacted or solicited for this contract.** Checking the box indicates that a pre-determined Subcontract Goal or Participation Plan Requirement was not set by the City resulting in your business not using subcontractors and will self-perform all work. If during the performance of the contract you employ subcontractors, the City must pre-approve subcontractors. Use of the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: Certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors.
- **No Firms were contacted because.** Provide brief explanation why no firms were contacted or solicited.
- **See attached documents.** Check box, if after you have completed the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the form. All DMI data not submitted on the MBD Form-10 must be in the same format and have all requested data from MBD Form-10 included.

The following instructions are for information of any and all subcontractors solicited.

- **"S" = SLBE, "W" = W/MBE.** Enter "**S**" for firms Certified by the City as Small Local Business Enterprises and/or "**W**" for firms Certified by the City as either Women/Minority Business Enterprise; **"O" = Non-certified others**.
- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification and payment of the contractor/subcontractor.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials** indicate the trade, service, or materials provided by the subcontractor. NIGP codes aka "National Institute of Governmental Purchasing" are listed at top section of document.
- **Contact Method L=letter, F=fax, E=Email, P=Phone.** Indicate with letter the method(s) of soliciting for bid.
- Q**uote or Resp. (response) Rec'd (received) Y/N**. Indicate "Y" Yes if you received a quotation or if you received a response to your solicitation. Indicate "N" No if you received no response to your solicitation from the subcontractor. Must keep records: log, ledger, documentation, etc. that can validate/verify.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.: 21-P-00417 Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

Company Name: Rep Services, Inc. Address: 165 W. Jessup Avenue, Longwood, FL 32750

Federal ID: 59-2978507 Phone: 407-831-9658 Fax: 866-232-8532 Email: bill@repservices.com

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

☐ **See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)**

Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

☑ **No Subcontracting/consulting (of any kind) will be performed on this contract.**

☐ **No Firms are listed to be utilized because:** _____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=W/MBE O =Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %

Total ALL Subcontract / Supplier Utilization $_____

Total SLBE Utilization $ _____

Total W/MBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. _____% Percent W/MBE Utilization of Total Bid/Proposal Amt. _____%

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: Bill Geary Name/Title: Vice President Date: 10/7/2024

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive Forms must be included with Bid / Proposal

Page 4 of 4 DMI – Solicited/Utilized

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) to be Utilized Form

(Form MBD-20)

This form must be submitted with all bids or proposals. All subcontractors (regardless of ownership or size) projected to be utilized must be included on this form. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

Contract No. This is the number assigned by the City of Tampa for the bid or proposal.

- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Subcontracting/consulting (of any kind) will be performed on this contract.** Checking box indicates your business will not use subcontractors when no Subcontract Goal or Participation Plan Requirement was set by the City, but will self-perform all work. When subcontractors are utilized during the performance of the contract, the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors, including completion and submitting Form-10 and Form-20.
- **No Firms listed To-Be-Utilized.** Check box; provide brief explanation why no firms were retained when a goal or participation plan requirement was set on the contract. **Note: Mandatory compliance with Good Faith Effort outreach (GFECP) requirements applies (MBD Form-50) and supporting documentation must accompany the bid.**
- **See attached documents.** Check box, if after completing the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the scope/value/percent utilization of subcontractors. Reproduce copies of MBD-20 and attach. All data not submitted on duplicate forms must be in the same format and content as specified in these instructions.

The following instructions are for information of Any and All subcontractors To Be Utilized.

- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **"S" = SLBE, "W" = W/MBE.** Enter "**S**" for firms Certified by the City as Small Local Business Enterprises and/or "**W**" for firms Certified by the City as Women/Minority Business Enterprise; **"O" = Non-certified others**.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials (NIGP code if Known)** Indicate the trade, service, or material provided by the subcontractor. Abbreviated list of NIGP is available at http:/www.tampagov.net/mbd "Information Resources".
- **Amount of Quote, Letters of Intent** (required for both SLBEs and W/MBEs).
- **Percent of Work/Contract.** Indicate the percent of the total contract price the subcontract(s) represent. For CCNA only (i.e. Consultant A/E Services) you must indicate subcontracts as percent of total scope/contract.
- **Total Subcontract/Supplier Utilization.** – Provide total dollar amount of all subcontractors/suppliers projected to be used for the contract. (Dollar amounts may be optional in CCNA depending on solicitation format).
- **Total SLBE Utilization.** Provide total dollar amount for all projected SLBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Total W/MBE Utilization.** Provide total dollar amount for all projected W/MBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Percent SLBE Utilization.** Total amount allocated to SLBEs divided by the total bid/proposal amount.
- **Percent W/MBE Utilization.** Total amount allocated to W/MBEs divided by the total bid/proposal amount.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign, and Submit all Forms 10,20, & 50 SHALL render the Bid or Proposal Non-Responsive

Good Faith Effort Compliance Plan (GFECP) Guidelines

for Women/Minority Business Enterprise\Small Local Business Enterprise ParticipationCity of Tampa - Equal Business Opportunity Program

(Form MBD 50 – See detailed instructions on page 3 of 3)

Contract Name PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421 **Bid Date** 10/7/2024

Bidder/Proposer Rep Services, Inc.

Signature Bill Geary **Date** 10/7/2024

Name Bill Geary **Title** Vice President

The Compliance Plan with attachments is a true account of Good Faith Efforts (GFE) made to achieve the participation goals as specified for Women/Minority Business Enterprises & Small Local Business Enterprises (W/MBE & SLBE) on the referenced contract:

☐ **W/MBE & SLBE participation Goal is Not Specified for this Solicitation however participation is aspirational and GFECP is required.**

☐ **W/MBE & SLBE participation Goal is Met or Exceeded (refer to Goal-Set Form MBD-90).**

☐ **W/MBE & SLBE participation Goal is Not Fully Achieved (refer to Goal-Set Form MBD-90).**

For each checkbox above Bidders/Proposers shall submit DMI Forms 10 and 20 which accurately report all subcontractors solicited and all subcontractors to-be-utilized. The following list is an overview of the required baseline GFECP action steps for all bids/proposals. Furthermore, it is understood that these GFECP requirements are weighted in the compliance evaluation based on the veracity and demonstrable degree of documentation provided with the bid/proposal:

(Check applicable boxes below - Must enclose supporting documents accordingly with Qualifying Remarks)

(1) Solicited through reasonable and available means the interest of W/MBE & SLBEs that have the capability to perform the work of the contract. The Bidder or Proposer must solicit this interest within enough time to allow the W/MBE & SLBEs to respond. The Bidder or Proposer must take appropriate steps to follow up initial solicitations with interested W/MBE & SLBEs. □ **See DMI report forms for subcontractors solicited**. □ **See enclosed supplemental data on solicitation efforts**.

□ **Qualifying Remarks**

(2) Provided interested W/MBE & SLBEs with adequate, specific scope information about the plans, specifications, and requirements of the contract, including addenda, in a timely manner to assist them in responding to the requested scope identified by bidder/proposer for the solicitation**.** □ **See enclosed actual solicitations used**.
□ **Qualifying Remarks**

(3) Negotiated in good faith with interested W/MBE & SLBEs that have submitted bids (e.g. adjusted quantities or scale). Documentation of negotiation must include the names, addresses, and telephone numbers of W/MBE & SLBEs that were solicited; the date of each such solicitation; a description of the information provided regarding the plans and specifications for the work selected for subcontracting; and evidence as to why agreements could not be reached with W/MBE & SLBEs to perform the work. Additional costs involved in soliciting and using subcontractors is not a sufficient reason for a bidder/proposer's failure to meet goals or achieve participation, as long as such costs are reasonable. Bidders are not required to accept excessive quotes in order to meet the goal.
□ **DMI Utilized Forms for sub-(contractor/consultant) reflect genuine negotiations** □ **This project is an RFQ/RFP in nature and negotiationsare limited to clarifications of scope/percentages, specifications, qualifications and subs fee schedules.**
□ **See enclosed documentation**.
□ **Qualifying Remarks**

(4) Not rejecting W/MBE & SLBEs as being unqualified without justification based on a thorough investigation of their capabilities. The W/MBE & SLBEs standing within its industry, membership in specific groups, organizations / associations and political or social affiliations are not legitimate causes for rejecting or not soliciting bids to meet the goals.
■ **Not applicable**. □ **See attached justification for rejection of a subcontractor's bid or proposal**. □ **Qualifying Remarks**

(5) Made scope(s) of work available to W/MBE & SLBE subcontractors and suppliers; and, segmented portions of the work or material consistent with the available W/MBE & SLBE subcontractors and suppliers, to facilitate meeting the goal. □ **In addition, Sub-Contractors could bid on their own choice of work or trade without restriction to a pre-determined**

portion. □ **See enclosed comments**.□ **Qualifying Remarks**

(6) Made good faith efforts, despite the ability or desire of Bidder/Proposer to perform the sub-tasks of a contract with its own forces/organization. A Bidder/Proposer who desires to self-perform the sub-tasks of a contract must demonstrate good faith efforts if the goal has not been met**.** □ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self-performed by the prime.** □ **Qualifying Remarks w/Documents**

(7) Segmented the portions of the work to be performed by W/MBEs & SLBEs in order to increase the likelihood that the goals will be met. This includes, where appropriate, breaking out contract work items into economically feasible units (quantities/scale) to facilitate W/MBE & SLBE participation, even when the Bidder/Proposer might otherwise prefer to perform these work items with its own forces**.** □ **Sub-Contractors could bid on their own choice of work or trade without restriction to a pre- determined portion.**□ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self- performed by the prime.** □ **See enclosed comments.**□ **Qualifying Remarks**

(8) Made efforts to assist interested W/MBEs & SLBEs in obtaining bonding, lines of credit, or insurance as required by the City or contractor.
□ **See enclosed documentation on initiatives undertaken and methods to accomplish**. □ **Qualifying Remarks**

(9) Made efforts to assist interested W/MBEs & SLBEs in obtaining necessary equipment, supplies, materials, or related assistance or services, including participation in an acceptable mentor-protégé program. □ **See enclosed documentation of initiatives and/or agreements.** □ **Qualifying Remarks**

(10) Effectively used the services of the City and other organizations that provide assistance in the recruitment and placement of W/MBEs & SLBEs.
□ **See enclosed documentation of services engaged.** □ **Overview (attached) of tactical actions and resources employed toward recruitment**

Note: Any unsolicited information in support of your Bid/RFP Compliance must accompany your submittal. □ **Identify Information Submitted**

Participation Plan: Guidance for Complying with Good Faith Efforts Outreach (page 3 of 3)

(1) All firms on the W/MBE & SLBE Goal Setting List must be solicited and documentation provided for email, fax,letters, phone calls, and other methods of outreach/communication with the listed firms. The DMI Solicited and DMI-Utilized forms must be completed for all firms solicited and all firms utilized. Other opportunities for subcontracting should be explored to attain participation. May consult Tampa EBO Office and/or researching the on-line Diversity Management Business System Directory for Tampa certified W/MBE & SLBEfirms.

(2) Solicitation of W/MBE & SLBEs, via written or electronic notification, should provide specific information on the services needed, where plans can be reviewed and assistance offered in obtaining these, if required. Solicitations should be sent a minimum of a week (i.e. 5 city business days or more) before the bid/proposal date. Actual copies of the bidder's solicitation containing their scope-specific instructions should be provided.

(3) With any quotes received, a follow-up should be made when needed to confirm detail scope of work. For anyW/MBE & SLBE low quotes rejected, an explanation shall be provided detailing negotiation efforts.

(4) If a low bid W/MBE & SLBE is rejected or deemed unqualified the contractor must provide an explanation and supporting documentation for this decision.

(5) Prime shall break down portions of work into economical feasible opportunities for subcontracting. The W/MBE & SLBE directory may be useful in identifying additional subcontracting opportunities and certified firms not listed in the "W/MBE & SLBE Goal Setting Firms Contact List."

(6) Contractor shall not preclude W/MBE & SLBEs from bidding on any part of work, even if the Contractor may desire to self-perform aspects of the work.

(7) Contractor shall avoid relying solely on subcontracting those scopes of work where W/MBE & SLBE availabilityis not sufficient to attain pre-determined goals; including RFP/RFQ solicitations, all of which require GFECPcompliance to achieve sub-consultant participation.

(8) In its solicitations, the Bidder should offer assistance to W/MBE & SLBEs in obtaining bonding, insurance, et cetera, if required of subcontractors by the City or Prime Contractor.

(9) In its solicitation, the Bidder should offer assistance in obtaining equipment for a specific job to W/MBE & SLBEs, if needed. This includes mobilization where applicable.

(10) Contractor should use the services offered by such agencies as the Small Business Development Center (SBDC) @ University South Fla.; SBDC @ Hillsborough County Entrepreneur Collaborative Center; Hillsborough NAACP Empowerment Center; Hillsborough County Economic Development Department DM/DWBE/SBE Program and Prospera-Hispanic Business Assoc. to name a few for the recruitment and placement of available WMBEs/SLBEs.

City of Tampa – DMI Sub-(Contractors/Consultants/Suppliers) Payments

(FORM MBD-30)

[ ] Partial [ ] Final

Contract No.: 21-P-00417 WO#,(if any): _____ Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

Contractor Name: _____ Address: 165 W. Jessup Avenue, Longwood, FL 32750

Federal ID: 59-2978507 Phone: 407-831-9658 Fax: 866-232-8532 Email: bill@repservices.com

GC Pay Period: _____ Payment Request/Invoice Number: _____ City Department: _____

Total Amount Requested for pay period: $_____ Total Contract Amount (including change orders):$_____

-Type of Ownership - (F=Female M=Male), BF BM = African Am., HF HM = Hispanic Am., AF AM = Asian Am., NF NM = Native Am., CF CM = Caucasian S = SLBE

Type Trade/Work Activity []Sub []Supplier Federal ID	Company Name Address Phone & Fax	Total Sub Contract Or PO Amount	Amount Paid To Date Amount Pending Previously Reported	Amount To Be Paid For This Period Sub Pay Period Ending Date
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$

(Modifying This Form or Failure to Complete and Sign May Result in Non-Compliance)

Certification: I hereby certify that the above information is a true and accurate account of payments to sub – contractors/consultants on this contract.

Signed: _____ Name/Title: Vice President Date: 10/7/2024

Note: Detailed Instructions for completing this form are on the next page

Page 2 of 2 – DMI Payment

Instructions for completing The DMI Sub-(Contractors/Consultants/ Suppliers) Payment Form (Form MBD-30)

This form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the pay period. If applicable, after payment has been made to the subcontractor, "Waiver and Release of Lien upon Progress Payment", "Affidavit of Contractor in Connection with Final Payment", or an affidavit of payment must be submitted with the amount paid for the pay period. The following will detail what data is required for this form. The instructions that follow correspond to the headings on the form required to be completed. **(Modifying or omitted information from this form my result in non-compliance).**

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **W.O.#** If the report covers a work order number (W.O.#) for the contract, please indicate it in that space.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business.
- **Address.** The physical address of your business.
- **Federal ID.** A number assigned to a business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **Pay Period.** Provide start and finish dates for pay period. (e.g. 05/01/13 – 05/31/13)
- **Payment Request/Invoice Number.** Provide sequence number for payment requests. (ex. Payment one, write 1 in space, payment three, write 3 in space provided.)
- **City Department**. The City of Tampa department to which the contract pertains.
- **Total Amount Requested for pay period.** Provide all dollars you are expecting to receive for the pay period.
- **Total Contract Amount (including change orders).** Provide expected total contract amount. This includes any change orders that may increase or decrease the original contract amount.
- **Signed/Name/Title/Date**. This is your certification that the information provided on the form is accurate.
- **See attached documents.** Check if you have provided any additional documentation relating to the payment data. Located at the bottom middle of the form.
- **Partial Payment.** Check if the payment period is a partial payment, not a final payment. Located at the top right of the form.
- **Final Payment.** Check of this period is the final payment period. Located at the top right of the form.

The following instructions are for information of any and all subcontractors used for the pay period.

- **(Type) of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business or SLBE.
- **Trade/Work Activity.** Indicate the trade, service, or material provided by the subcontractor.
- **SubContractor/SubConsultant/Supplier.** Please indicate status of firm on this contract.
- **Federal ID.** A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Total Subcontract Amount.** Provide total amount of subcontract for subcontractor including change orders.
- **Amount Paid To Date.** Indicate all dollars paid to date for the subcontractor.
- **Amount Pending, Previously Reported.** Indicate any amount previously reported that payments are pending.
- **Amount To Be Paid for this Period.** Provide dollar amount of dollars requested for the pay period.
- **Sub Pay Period Ending Date.** Provide date for which subcontractor invoiced performed work.

Forms must be signed and dated or will be considered incomplete. The company authorized representative must sign and certify the information is true and accurate. Failure to sign this document or return the document unsigned can be cause for determining a company is in non-compliance of Ordinance 2008-89.

If any additional information is required or you have any questions, you may call the Office of Equal Business Opportunity at (813) 274-5522.

AFFIDAVIT OF COMPLIANCE WITH FOREIGN COUNTRIES OF CONCERN PURSUANT TO SECTION 287.138, FLORIDA STATUTES, CONVICTED VENDOR LIST (PUBLIC ENTITY CRIME) PURSUANT TO SECTION 287.133, FLORIDA STATUTES, PROHIBITION AGAINST CONTRACTING WITH SCRUTINIZED COMPANIES PURSUANT TO SECTION 287.135, FLORIDA STATUTES, PROHIBITION AGAINST HUMAN TRAFFICKING PURSUANT TO SECTION 787.06, FLORIDA STATUTES, AND COMPLIANCE WITH E-VERIFY PURSUANT TO SECTION 448.095, FLORIDA STATUTES

The undersigned Affiant, on behalf of the Entity listed below ("Entity"), hereby attests under penalty of perjury as follows:

Public Entity Crimes

1. Affiant understands that a "person" or "affiliate" who has been placed on the "convicted vendor list" following a "conviction" for a "public entity crime" (as those terms are defined in Section 287.133, Florida Statutes) for a period of 36 months following the date of being placed on the convicted vendor list, is ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa. Entities placed on either the "discriminatory vendor list" or "antitrust vendor list" are ineligible to transact business with the City of Tampa.
2. Affiant understands and attests that neither Affiant, nor any person or affiliate of the Entity, nor the Entity have been placed on any of the above referenced vendor lists that would render the Entity ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa.

Scrutinized Companies

3. Affiant understands that pursuant to Section 287.135(2)(a), Florida Statutes, the Entity would be ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa if the Entity is on the "Scrutinized Companies that Boycott Israel List" (created pursuant to Section 215.4725, Florida Statutes) or is engaged in a boycott of Israel. If the value of the contract is one million dollars or more if, at the time of bidding on, submitting a proposal or reply for, or entering into or renewing a contract, the Entity:
    a. Is on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, created pursuant to Section 215.473, Florida Statutes; or
    b. Is engaged in business operations in Cuba or Syria.

4. Affiant attests that neither Affiant nor the Entity are on the Scrutinized Companies that Boycott Israel List, Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, nor are we engaged in a boycott of Israel, and understand that any resulting contract may be terminated for a falsification of this Affidavit.

E-Verify

5. Affiant understands and attests that pursuant to Section 448.095(5), Florida Statutes, the Entity must comply with Florida's E-Verify law to enter into a contract with the City of Tampa.
6. The undersigned Entity is registered with and uses the United States Department of Homeland Security's E-Verify system to verify the work authorization status of all new employees.
7. No public employer has terminated a contract with the Entity pursuant to Section 448.095(5), Florida Statutes, within the year immediately preceding the date of contracting or submitting a bid, proposal or replay to contract with the City of Tampa.
8. Entity is currently in compliance and will remain in compliance, for the duration of any contract with

the City of Tampa, with all requirements of Section 448.095(5), Florida Statutes.

9. Affiant understands and attests that, if there is a good faith belief that the Entity has knowingly violated Section 448.09(1), Florida Statutes, there is an obligation on the part of the City of Tampa to terminate a contract pursuant to Section 448.095(5), Florida Statutes.
10. Affiant understands and attests that, if there is a good faith belief that one of Entity's subcontractor(s) has knowingly violated the Section 448.09(1), Florida Statutes, but the Entity has otherwise complied with its obligations thereunder, then the Entity will be required to immediately terminate the contract with the subcontractor in order to continue providing services to the City of Tampa.

Anti-Human Trafficking

11. Affiant hereby understands and attests that the undersigned Entity does not use coercion of labor or services as those terms are defined in section 787.06(13), Florida Statutes.

Compliance with Foreign Countries of Concern

12. Affiant, on behalf of the Entity attest to the following:
    a. Entity is not owned by the government of a foreign country of concern as defined in Section 287.138, Florida Statutes. (Source: § 287.138(2)(a), Florida Statutes.)

    b. The government of a foreign country of concern does not have a controlling interest in Entity. (Source: § 287.138(2)(b), Florida Statutes.)

    c. Entity is not organized under the laws of, and does not have a principal place of business in a foreign country of concern. (Source: § 287.138(2)(c), Florida Statutes.)

The undersigned is authorized to execute this Affidavit on behalf of Entity.

The undersigned further sayeth naught.

Date: 10/7/2024 (Affiant) Signed: Bill Geary

Entity: Rep Services, Inc. Name: Bill Geary

Title: Vice President

STATE OF Florida
COUNTY OF Seminole

SWORN to (or affirmed) and subscribed before me, by means of ☒ physical presence or ❑ online notarization, this 7th day of October, 20 24, by Bill Geary, as Vice President, who is personally known to me or who has produced _____ as identification.

[AFFIX NOTARY SEAL/STAMP]

Dennis Roberts
Signature of Notary
Name: Dennis Roberts
(Print or Type Name)
Notary Public: State of Florida
My Commission Expires 4/19/2028

DENNIS STEVE ROBERTS, JR.
Commission # HH 484868
Expires April 19, 2028

#VDT8QQYV0D2EO7v1

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 7/30/2024

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
Alexander Insurance Agency
541 South Orlando Avenue, Suite 206
Maitland FL 32751

License#: L029632

CONTACT NAME: Jennifer Vann
PHONE (A/C, No, Ext): 407-629-4825 **FAX (A/C, No):** 407-629-5407
E-MAIL ADDRESS: info@alexfinancial.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Evanston Insurance Company	35378
INSURER B : Travelers Indemnity Co of Amer	25666
INSURER C : Ohio Casualty Company	24074
INSURER D : Sentinel Ins. Co., LTD	11000
INSURER E : Hartford Insurance Co of SE	38261
INSURER F : Lloyd's of London	

INSURED
Rep Services, Inc.
165 West Jessup Ave
Longwood FL 32750-4146

REPSERV-01

COVERAGES **CERTIFICATE NUMBER:** 1032293979 **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	
E	X COMMERCIAL GENERAL LIABILITY	Y	Y	21SBMBK3355	8/1/2024	8/1/2025	EACH OCCURRENCE	$ 1,000,000
	[ ] CLAIMS-MADE [X] OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 500,000
	X BUSINESS OWNERS						MED EXP (Any one person)	$ 10,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY	$ 1,000,000
	[ ] POLICY [X] PRO-JECT [ ] LOC						GENERAL AGGREGATE	$ 2,000,000
	OTHER:						PRODUCTS - COMP/OP AGG	$ Below
								$
D	AUTOMOBILE LIABILITY	Y	Y	21UECHV0794	8/1/2024	8/1/2025	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	X ANY AUTO						BODILY INJURY (Per person)	$
	[ ] OWNED AUTOS ONLY [ ] SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
A	[ ] UMBRELLA LIAB [X] OCCUR	Y	Y	MKLV3EUL103353	8/1/2024	8/1/2025	EACH OCCURRENCE	$ 5,000,000
	X EXCESS LIAB [ ] CLAIMS-MADE						AGGREGATE	$ 5,000,000
	DED [X] RETENTION $ 10,000							$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N	N / A	Y	UB-3J747620-24-42-G	8/1/2024	8/1/2025	X PER STATUTE [ ] OTH-ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? [N] (Mandatory in NH)						E.L. EACH ACCIDENT	$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000
C	INLAND MARINE			BMO60331810	8/1/2024	8/1/2025	JOB LIMIT	$250,000
F	ERRORS & OMMISSIONS			ANE1939938.24	8/1/2024	8/1/2025	CLAIM/AGGREGATE	$2000000/$2000000
A	GL - Products Completed			MKLV3PBC003347	8/1/2024	8/1/2025	OCCURRENCE/AGGREGATE	$1000000/$2000000

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

CERTIFICATE HOLDER

City of Tampa
306 E. Jackson Street
Tampa FL 33602
USA

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



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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 7/30/2024

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PRODUCER
Alexander Insurance Agency
541 South Orlando Avenue, Suite 206
Maitland FL 32751

License#: L029632

CONTACT NAME: Jennifer Vann
PHONE (A/C, No, Ext): 407-629-4825 **FAX (A/C, No):** 407-629-5407
E-MAIL ADDRESS: info@alexfinancial.com

INSURER(S) AFFORDING COVERAGE	NAIC #
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INSURER C : Ohio Casualty Company	24074
INSURER D : Sentinel Ins. Co., LTD	11000
INSURER E : Hartford Insurance Co of SE	38261
INSURER F : Lloyd's of London	

INSURED
Rep Services, Inc.
165 West Jessup Ave
Longwood FL 32750-4146
REPSERV-01

COVERAGES **CERTIFICATE NUMBER:** 943199119 **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	
E	X COMMERCIAL GENERAL LIABILITY	Y	Y	21SBMBK3355	8/1/2024	8/1/2025	EACH OCCURRENCE	$ 1,000,000
	[ ] CLAIMS-MADE [X] OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 500,000
	X BUSINESS OWNERS						MED EXP (Any one person)	$ 10,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY	$ 1,000,000
	[ ] POLICY [X] PRO-JECT [ ] LOC						GENERAL AGGREGATE	$ 2,000,000
	OTHER:						PRODUCTS - COMP/OP AGG	$ Below
								$
D	AUTOMOBILE LIABILITY	Y	Y	21UECHV0794	8/1/2024	8/1/2025	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	X ANY AUTO						BODILY INJURY (Per person)	$
	[ ] OWNED AUTOS ONLY [ ] SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
A	[ ] UMBRELLA LIAB [X] OCCUR	Y	Y	MKLV3EUL103353	8/1/2024	8/1/2025	EACH OCCURRENCE	$ 5,000,000
	X EXCESS LIAB [ ] CLAIMS-MADE						AGGREGATE	$ 5,000,000
	DED [X] RETENTION $ 10,000							$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N	N / A	Y	UB-3J747620-24-42-G	8/1/2024	8/1/2025	X PER STATUTE [ ] OTH-ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? [N] (Mandatory in NH)						E.L. EACH ACCIDENT	$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000
C	INLAND MARINE			BMO60331810	8/1/2024	8/1/2025	JOB LIMIT	$250,000
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A	GL - Products Completed			MKLV3PBC003347	8/1/2024	8/1/2025	OCCURRENCE/AGGREGATE	$1000000/$2000000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Proj: Bid #31041421

CERTIFICATE HOLDER

City of Tampa
306 E. Jackson Street 3N
Tampa FL 33602
USA

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

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City of Tampa
Jane Castor, Mayor

Purchasing Department
Deanna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E. Hanna Ave.
Tampa, Florida 33610
Office: (813) 274-8351
Fax: (813) 274-8355

M E M O R A N D U M

DATE: July 17, 2024

TO: Lisa Grizzle
Parks & Recreation Administrative Manager
Parks and Recreation

FROM: Theresa Samuel, Purchasing Technician

RE: **REQUEST FOR RENEWAL/RE-BID**

The award for **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421** provided by **TOP LINE RECREATION, INC.** will expire on **JANUARY 12, 2025**. This award has a one-year renewal period. Per the terms of the contract, the vendor is entitled to request a **3.0%** escalation using the Consumer Price Index.

We are requesting information from you as to your needs relative to renewing the award for the above referenced goods. Please indicate your preference with an **(X)**, for one of the options listed below.

__x__ 1. You want to renew with the current vendor(s). ***Please attach to the Request for Renewal/Re-bid form an explanation as to why it is in the best interest of the Department to Re-new rather than Re-bid. Include a statement that the current pricing has been reviewed and remains fair and reasonable. The information that you provide will appear in the background section of the agenda request form that will appear before City Council. Please submit the MBD-30 payment form (if applicable) to this renewal. The MBD-30 form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the evaluation period.***

a.__x__ Please complete the attached **Vendor Performance Evaluation** form.

b._____ Please complete the attached **MBD-30 Sub-Contractor Payment** form **(if applicable for this renewal).**

	ESTIMATED EXPENDITURE	FUND	COST CENTER	ACCOUNT
FY_____	Controlled by Requisition			
FY_____				

(If funds are to be split between two fiscal years, please indicate the years and amounts)

____ 2. You do not want to renew with this vendor and would like to Re-bid. **Please provide an explanation:**

_____

_____

____ 3.You do not want to renew or re-bid at this time. (Let contract expire).

Please return this document and the requested information to my office by **July 23, 2024,** in order that we may process your request in a timely manner.

Dept. Contact Name (Printed): Danielle Riffenburg **Signature:** _____ **Date:** _____

Please fax to 813-274-8355 or email to theresa.samuel@tampagov.net

VENDOR PERFORMANCE EVALUATION

Name of Vendor Reviewed:	TOP LINE RECREATION, INC.	
Contract Name & Number:	PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421	
Rating Period	**From: 1/13/24**	**To: Present**

	Place an X for your selection	**Excellent**	**Satisfactory**	**Unsatisfactory**
Delivery/Service completed when required:	Delivered/Service as ordered and to spec?		**x**	
	Timeliness of Product/Service		**x**	
	Quality of Product/Service		**x**	
	Delivery of Products/ Complete/ Undamaged?		**x**	

Please Describe Quality of Product or Service: Products delivered are as expected.

	Communication (Phone, E-Mail, or Fax availability)?		**x**	
	Responsiveness and proper follow up regarding any contractual or performance issues?		**x**	
Customer Satisfaction	Product or Services fulfilled/completed		**x**	

Have you discussed issues with vendor? _____ Yes ___x___ No

Would you like to request a meeting with Purchasing & Vendor? _____Yes ___x___ No

Performance during rating period: No known issues with products or performance.

Customer Service Comments: Customer service is as expected.

Dept. Contact Name (Printed): _Danielle Riffenburg_____ **Signature:** Danielle Riffenburg Digitally signed by Danielle Riffenburg Date: 2024.08.29 15:38:04 -04'00'

Rev: 4/20/11

PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

TOP LINE RECREATION, INC.

Parks and Recreation believes it is in the best interest of the City to renew the contract for Bid #31041421 with TOP LINE RECREATION, INC. Maintaining the current contract will allow for efficient maintenance and repair of existing and new equipment installed under this contract. The current pricing has been reviewed and remains fair and reasonable.

City of Tampa
Jane Castor, Mayor

Purchasing Department
DeAnna Faggart, NIGP-CPP, CPPO, CPPB, Director
2555 E Hanna Avenue
Tampa, Florida 33610

Office (813) 274-8351
Fax: (813) 274-8355

September 13, 2024

Sonia Perkins
Top Line Recreation, Inc.
2922 Howland Blvd, Suite 4
Deltona, FL 32725
soniap@toplinerec.com

Dear Ms. Perkins:

Your firm has an award with the City of Tampa to provide **PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421**

This existing award expires on **JANUARY 12, 2025**. Under the provisions of this award, terms and conditions may be renewed if mutually agreeable to both parties for an additional **one-year** period.

If your firm desires to renew the award, please complete and return the following:

- Statement of Intent
- Form MBD10 – "Schedule of All Sub-Contractors/Consultants/Suppliers Solicited"
- Form MBD20 – "Schedule of Sub-Contractors/Consultants/Suppliers to be Utilized"
- Form MBD50 – "Good Faith Effort Compliance Plan (GFECP) Guidelines"
- Form MBD30 – "Sub-Contractors/Consultant/Suppliers Payments"
- Affidavit of Compliance:
    - FS287.138 Compliance with Foreign Countries of Concern
    - FS287.133 Convicted Vendor List (Public Entity Crimes)
    - FS287.135 Prohibition Against Contracting with Scrutinized Companies
    - FS787.06 Prohibition Against Human Trafficking
    - FS448.095 Compliance With E-Verify

If your firm desires to renew the award, please complete and return the above listed documents. The MBD forms should document any subcontractors that are going to be used to provide goods/services for the award's renewal period and/or if any request for payments has been submitted. If payments were not requested or subcontractors were not used, please mark each form accordingly. **All documents must be submitted for the award/contract to be renewed.**

If you do not wish to renew, please indicate so on the attached Statement of Intent.

Sincerely,

Theresa Samuel
Purchasing Technician
(813) 274-8635
theresa.samuel@tampagov.net

STATEMENT OF INTENT

I, SONIA M PERKINS - PRESIDENT of Topline Recreation

being authorized to contract for City of TAMPA, do hereby express the firm's desire to renew the above referenced agreement upon the same prices, same terms and conditions. I understand that an extension of the agreement requires the City's approval. This statement represents the above firm's binding approval of an extension of this agreement.

By: Sonia Perkins 09-30-24

Authorized Signature Date

SONIA PERKINS

Type or Print Name Above

Title: PRESIDENT

Comments:

( ) We do not wish to renew this award. The source for non-renewal is:

By: _____ _____

Authorized Signature Date

_____

Type or Print Name Above

Title: _____

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-10)

Contract No.: 21-P-00417 Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

Company Name: TOP LINE RECREATION INC Address: 2922 HOWLAND BLVD - ST 4 DELTONA, FL 32725

Federal ID: 45-3009109 Phone: 386-575-8359 Fax: _____ Email: SONIAP@TOPLINEREC.COM

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.

- [x] **No Firms were contacted or solicited for this contract.**
- [ ] **No Firms were contacted because:** _____
- [ ] **See attached list of additional Firms solicited and all supplemental information (List must comply to this form)**

Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=W/MBE O = Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N
W45-3009109	TOP LINE RECREATION INC 2922 HOWLAND BLVD - ST 4 DELTONA, FL 32725 386-575-8359 - SONIAP@TOPLINEREC.COM	HF	650	E	N

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub-contracting opportunities on this contract.

Signed: _____ Name/Title: SONIA M PERKINS - PRESIDENT Date: 09-30-24

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

Page 2 of 4 – DMI Solicited/Utilized

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) Solicited Form (Form MBD-10)

This form must be submitted with all bids or proposals. **All** subcontractors (regardless of ownership or size) solicited and subcontractors from whom unsolicited quotations were received must be included on this form. The instructions that follow correspond to the headings on the form required to be completed. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Firms were contacted or solicited for this contract.** Checking the box indicates that a pre-determined Subcontract Goal or Participation Plan Requirement was not set by the City resulting in your business not using subcontractors and will self-perform all work. If during the performance of the contract you employ subcontractors, the City must pre-approve subcontractors. Use of the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: Certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors.
- **No Firms were contacted because.** Provide brief explanation why no firms were contacted or solicited.
- **See attached documents.** Check box, if after you have completed the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the form. All DMI data not submitted on the MBD Form-10 must be in the same format and have all requested data from MBD Form-10 included.

The following instructions are for information of any and all subcontractors solicited.

- **"S" = SLBE, "W" = W/MBE.** Enter "S" for firms Certified by the City as Small Local Business Enterprises and/or "W" for firms Certified by the City as either Women/Minority Business Enterprise; **"O" = Non-certified others.**
- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification and payment of the contractor/subcontractor.
- **Company Name, Address, Phone & Fax.** Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials** indicate the trade, service, or materials provided by the subcontractor. NIGP codes aka "National Institute of Governmental Purchasing" are listed at top section of document.
- **Contact Method L=letter, F=fax, E=Email, P=Phone.** Indicate with letter the method(s) of soliciting for bid.
- **Quote or Resp. (response) Rec'd (received) Y/N.** Indicate "Y" Yes if you received a quotation or if you received a response to your solicitation. Indicate "N" No if you received no response to your solicitation from the subcontractor. Must keep records: log, ledger, documentation, etc. that can validate/verify.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.: 21-P-00417 Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

Company Name: TOP LINE RECREATION INC Address: 2922 HOWLAND BLVD - ST 4 DELTONA, FL 32725

Federal ID: 45-3009109 Phone: 386-575-8359 Fax: _____ Email: SONIAP@TOPLINEREC.COM

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

☑ **See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)**

Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

☐ **No Subcontracting/consulting (of any kind) will be performed on this contract.**

☐ **No Firms are listed to be utilized because:** _____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=W/MBE O =Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %
S88-3128494	TOTAL MAINTENANCE 37738 TIFFANY RD DADE CITY, FL 33525 813-766-2348 TOTALMAINTENANCEANDWELDING@GMAIL.COM	CM			

Total ALL Subcontract / Supplier Utilization $ _____

Total SLBE Utilization $ _____

Total W/MBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. ____**% Percent W/MBE Utilization of Total Bid/Proposal Amt.** ____**%**

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: _____ Name/Title: SONIA M PERKINS -PRESIDENT Date: 09-30-2024

Failure to Complete, Sign and Submit Forms 10, 20, & 50 SHALL render the Bid or Proposal Non-Responsive Forms must be included with Bid / Proposal

Page 4 of 4 DMI – Solicited/Utilized

Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) to be Utilized Form

(Form MBD-20)

This form must be submitted with all bids or proposals. All subcontractors (regardless of ownership or size) projected to be utilized must be included on this form. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

Contract No. This is the number assigned by the City of Tampa for the bid or proposal.

- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba) if applicable.
- **Address.** The physical address of your business.
- **Federal ID.** FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Subcontracting/consulting (of any kind) will be performed on this contract.** Checking box indicates your business will not use subcontractors when no Subcontract Goal or Participation Plan Requirement was set by the City, but will self-perform all work. When subcontractors are utilized during the performance of the contract, the "Sub-(Contractors/Consultants/Suppliers) Payments" form (MBD Form-30) must be submitted with every pay application and invoice. Note: certified SLBE or W/MBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors, including completion and submitting Form-10 and Form-20.
- **No Firms listed To-Be-Utilized.** Check box; provide brief explanation why no firms were retained when a goal or participation plan requirement was set on the contract. **Note: Mandatory compliance with Good Faith Effort outreach (GFECP) requirements applies (MBD Form-50) and supporting documentation must accompany the bid.**
- **See attached documents.** Check box, if after completing the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the scope/value/percent utilization of subcontractors. Reproduce copies of MBD-20 and attach. All data not submitted on duplicate forms must be in the same format and content as specified in these instructions.

The following instructions are for information of Any and All subcontractors To Be Utilized.

- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **"S" = SLBE, "W" = W/MBE.** Enter "S" for firms Certified by the City as Small Local Business Enterprises and/or "W" for firms Certified by the City as Women/Minority Business Enterprise; **"O" = Non-certified others.**
- **Company Name, Address, Phone & Fax.** Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials (NIGP code if Known)** Indicate the trade, service, or material provided by the subcontractor. Abbreviated list of NIGP is available at http:/www.tampagov.net/mbd "Information Resources".
- **Amount of Quote, Letters of Intent** (required for both SLBEs and W/MBEs).
- **Percent of Work/Contract.** Indicate the percent of the total contract price the subcontract(s) represent. For CCNA only (i.e. Consultant A/E Services) you must indicate subcontracts as percent of total scope/contract.
- **Total Subcontract/Supplier Utilization.** – Provide total dollar amount of all subcontractors/suppliers projected to be used for the contract. (Dollar amounts may be optional in CCNA depending on solicitation format).
- **Total SLBE Utilization.** Provide total dollar amount for all projected SLBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Total W/MBE Utilization.** Provide total dollar amount for all projected W/MBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Percent SLBE Utilization.** Total amount allocated to SLBEs divided by the total bid/proposal amount.
- **Percent W/MBE Utilization.** Total amount allocated to W/MBEs divided by the total bid/proposal amount.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522.

Failure to Complete, Sign, and Submit all Forms 10,20, & 50 SHALL render the Bid or Proposal Non-Responsive

Good Faith Effort Compliance Plan (GFECP) Guidelines

for Women/Minority Business Enterprise\Small Local Business Enterprise ParticipationCity of Tampa - Equal Business Opportunity Program

(Form MBD 50 – See detailed instructions on page 3 of 3)

Contract Name PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES) 21 **Bid Date** _____

Bidder/Proposer TOP LINE RECREATION INC

Signature _____ **Date** 09-30-24

Name SONIA M PERKINS **Title** PRESIDENT

The Compliance Plan with attachments is a true account of Good Faith Efforts (GFE) made to achieve the participation goals as specified for Women/Minority Business Enterprises & Small Local Business Enterprises (W/MBE & SLBE) on the referenced contract:

☐ **W/MBE & SLBE participation Goal is Not Specified for this Solicitation however participation is aspirational and GFECP is required.**

☐ **W/MBE & SLBE participation Goal is Met or Exceeded (refer to Goal-Set Form MBD-90).**

☐ **W/MBE & SLBE participation Goal is Not Fully Achieved (refer to Goal-Set Form MBD-90).**

For each checkbox above Bidders/Proposers shall submit DMI Forms 10 and 20 which accurately report all subcontractors solicited and all subcontractors to-be-utilized. The following list is an overview of the required baseline GFECP action steps for all bids/proposals. Furthermore, it is understood that these GFECP requirements are weighted in the compliance evaluation based on the veracity and demonstrable degree of documentation provided with the bid/proposal:

(Check applicable boxes below - Must enclose supporting documents accordingly with Qualifying Remarks)

(1) Solicited through reasonable and available means the interest of W/MBE & SLBEs that have the capability to perform the work of the contract. The Bidder or Proposer must solicit this interest within enough time to allow the W/MBE & SLBEs to respond. The Bidder or Proposer must take appropriate steps to follow up initial solicitations with interested W/MBE & SLBEs. ☐ **See DMI report forms for subcontractors solicited.** ☐ **See enclosed supplemental data on solicitation efforts.**

☐ **Qualifying Remarks**

(2) Provided interested W/MBE & SLBEs with adequate, specific scope information about the plans, specifications, and requirements of the contract, including addenda, in a timely manner to assist them in responding to the requested scope identified by bidder/proposer for the solicitation. ☐ **See enclosed actual solicitations used.**
☐ **Qualifying Remarks**

(3) Negotiated in good faith with interested W/MBE & SLBEs that have submitted bids (e.g. adjusted quantities or scale). Documentation of negotiation must include the names, addresses, and telephone numbers of W/MBE & SLBEs that were solicited; the date of each such solicitation; a description of the information provided regarding the plans and specifications for the work selected for subcontracting; and evidence as to why agreements could not be reached with W/MBE & SLBEs to perform the work. Additional costs involved in soliciting and using subcontractors is not a sufficient reason for a bidder/proposer's failure to meet goals or achieve participation, as long as such costs are reasonable. Bidders are not required to accept excessive quotes in order to meet the goal.
☐ **DMI Utilized Forms for sub-(contractor/consultant) reflect genuine negotiations** ☐ **This project is an RFQ/RFP in nature and negotiationsare limited to clarifications of scope/percentages, specifications, qualifications and subs fee schedules.**
☐ **See enclosed documentation.**
☐ **Qualifying Remarks**

(4) Not rejecting W/MBE & SLBEs as being unqualified without justification based on a thorough investigation of their capabilities. The W/MBE & SLBEs standing within its industry, membership in specific groups, organizations / associations and political or social affiliations are not legitimate causes for rejecting or not soliciting bids to meet the goals.
☐ **Not applicable.** ☐ **See attached justification for rejection of a subcontractor's bid or proposal.** ☐ **Qualifying Remarks**

(5) Made scope(s) of work available to W/MBE & SLBE subcontractors and suppliers; and, segmented portions of the work or material consistent with the available W/MBE & SLBE subcontractors and suppliers, to facilitate meeting the goal. ☐ **In addition, Sub-Contractors could bid on their own choice of work or trade without restriction to a pre-determined**

portion. □ **See enclosed comments.**□ **Qualifying Remarks**

(6) Made good faith efforts, despite the ability or desire of Bidder/Proposer to perform the sub-tasks of a contract with its own forces/organization. A Bidder/Proposer who desires to self-perform the sub-tasks of a contract must demonstrate good faith efforts if the goal has not been met. □ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self-performed by the prime.** □ **Qualifying Remarks w/Documents**

(7) Segmented the portions of the work to be performed by W/MBEs & SLBEs in order to increase the likelihood that the goals will be met. This includes, where appropriate, breaking out contract work items into economically feasible units (quantities/scale) to facilitate W/MBE & SLBE participation, even when the Bidder/Proposer might otherwise prefer to perform these work items with its own forces. □ **Sub-Contractors could bid on their own choice of work or trade without restriction to a pre- determined portion.**□ **Sub-Contractors were not prohibited from submitting bids/proposals and were solicited on work typically self- performed by the prime.** □ **See enclosed comments.**□ **Qualifying Remarks**

(8) Made efforts to assist interested W/MBEs & SLBEs in obtaining bonding, lines of credit, or insurance as required by the City or contractor.
□ **See enclosed documentation on initiatives undertaken and methods to accomplish.** □ **Qualifying Remarks**

(9) Made efforts to assist interested W/MBEs & SLBEs in obtaining necessary equipment, supplies, materials, or related assistance or services, including participation in an acceptable mentor-protégé program. □ **See enclosed documentation of initiatives and/or agreements.** □ **Qualifying Remarks**

(10) Effectively used the services of the City and other organizations that provide assistance in the recruitment and placement of W/MBEs & SLBEs.
□ **See enclosed documentation of services engaged.** □ **Overview (attached) of tactical actions and resources employed toward recruitment**

Note: Any unsolicited information in support of your Bid/RFP Compliance must accompany your submittal. □ **Identify Information Submitted**

Participation Plan: Guidance for Complying with Good Faith Efforts Outreach (page 3 of 3)

(1) All firms on the W/MBE & SLBE Goal Setting List must be solicited and documentation provided for email, fax,letters, phone calls, and other methods of outreach/communication with the listed firms. The DMI Solicited and DMI-Utilized forms must be completed for all firms solicited and all firms utilized. Other opportunities for subcontracting should be explored to attain participation. May consult Tampa EBO Office and/or researching the on-line Diversity Management Business System Directory for Tampa certified W/MBE & SLBEfirms.

(2) Solicitation of W/MBE & SLBEs, via written or electronic notification, should provide specific information on the services needed, where plans can be reviewed and assistance offered in obtaining these, if required. Solicitations should be sent a minimum of a week (i.e. 5 city business days or more) before the bid/proposal date. Actual copies of the bidder's solicitation containing their scope-specific instructions should be provided.

(3) With any quotes received, a follow-up should be made when needed to confirm detail scope of work. For anyW/MBE & SLBE low quotes rejected, an explanation shall be provided detailing negotiation efforts.

(4) If a low bid W/MBE & SLBE is rejected or deemed unqualified the contractor must provide an explanation and supporting documentation for this decision.

(5) Prime shall break down portions of work into economical feasible opportunities for subcontracting. The W/MBE & SLBE directory may be useful in identifying additional subcontracting opportunities and certified firms not listed in the "W/MBE & SLBE Goal Setting Firms Contact List."

(6) Contractor shall not preclude W/MBE & SLBEs from bidding on any part of work, even if the Contractor may desire to self-perform aspects of the work.

(7) Contractor shall avoid relying solely on subcontracting those scopes of work where W/MBE & SLBE availabilityis not sufficient to attain pre-determined goals; including RFP/RFQ solicitations, all of which require GFECPcompliance to achieve sub-consultant participation.

(8) In its solicitations, the Bidder should offer assistance to W/MBE & SLBEs in obtaining bonding, insurance, et cetera, if required of subcontractors by the City or Prime Contractor.

(9) In its solicitation, the Bidder should offer assistance in obtaining equipment for a specific job to W/MBE & SLBEs, if needed. This includes mobilization where applicable.

(10) Contractor should use the services offered by such agencies as the Small Business Development Center (SBDC) @ University South Fla.; SBDC @ Hillsborough County Entrepreneur Collaborative Center; Hillsborough NAACP Empowerment Center; Hillsborough County Economic Development Department DM/DWBE/SBE Program and Prospera-Hispanic Business Assoc. to name a few for the recruitment and placement of available WMBEs/SLBEs.

Page 1 of 2 –DMI Payment
City of Tampa – DMI Sub-(Contractors/Consultants/Suppliers) Payments
(FORM MBD-30)

[ ] Partial [ ] Final

Contract No.: 21-P-00417 WO#,(if any): _____ Contract Name: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT (PRODUCTS AND SERVICES), BID #31041421

Contractor Name: TOP LINE RECREATION INC Address: 2922 HOWLAND BLVD - ST 4 DELTONA, FL 32725

Federal ID: 45-3009109 Phone: 386-575-8359 Fax: _____ Email: SONIAP@TOPLINEREC.COM

GC Pay Period: _____ Payment Request/Invoice Number: _____ City Department: _____

Total Amount Requested for pay period: $_____ Total Contract Amount (including change orders):$_____

\-Type of Ownership - (F=Female M=Male), BF BM = African Am., HF HM = Hispanic Am., AF AM = Asian Am., NF NM = Native Am., CF CM = Caucasian S = SLBE

Type Trade/Work Activity []Sub []Supplier Federal ID	Company Name Address Phone & Fax	Total Sub Contract Or PO Amount	Amount Paid To Date Amount Pending Previously Reported	Amount To Be Paid For This Period Sub Pay Period Ending Date
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$

(Modifying This Form or Failure to Complete and Sign May Result in Non-Compliance)

Certification: I hereby certify that the above information is a true and accurate account of payments to sub – contractors/consultants on this contract.

Signed: _____ Name/Title: SONIA M PERKINS - PRESIDENT Date: 09-30-24

Note: Detailed Instructions for completing this form are on the next page

Page 2 of 2 – DMI Payment

Instructions for completing The DMI Sub-(Contractors/Consultants/ Suppliers) Payment Form (Form MBD-30)

This form must be submitted with all invoicing or payment requests where there has been subcontracting rendered for the pay period. If applicable, after payment has been made to the subcontractor, "Waiver and Release of Lien upon Progress Payment", "Affidavit of Contractor in Connection with Final Payment", or an affidavit of payment must be submitted with the amount paid for the pay period. The following will detail what data is required for this form. The instructions that follow correspond to the headings on the form required to be completed. **(Modifying or omitted information from this form my result in non-compliance).**

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **W.O.#** If the report covers a work order number (W.O.#) for the contract, please indicate it in that space.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business.
- **Address.** The physical address of your business.
- **Federal ID.** A number assigned to a business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **Pay Period.** Provide start and finish dates for pay period. (e.g. 05/01/13 – 05/31/13)
- **Payment Request/Invoice Number.** Provide sequence number for payment requests. (ex. Payment one, write 1 in space, payment three, write 3 in space provided.)
- **City Department**. The City of Tampa department to which the contract pertains.
- **Total Amount Requested for pay period.** Provide all dollars you are expecting to receive for the pay period.
- **Total Contract Amount (including change orders).** Provide expected total contract amount. This includes any change orders that may increase or decrease the original contract amount.
- **Signed/Name/Title/Date.** This is your certification that the information provided on the form is accurate.
- **See attached documents.** Check if you have provided any additional documentation relating to the payment data. Located at the bottom middle of the form.
- **Partial Payment.** Check if the payment period is a partial payment, not a final payment. Located at the top right of the form.
- **Final Payment.** Check of this period is the final payment period. Located at the top right of the form.

The following instructions are for information of any and all subcontractors used for the pay period.

- **(Type) of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business or SLBE.
- **Trade/Work Activity.** Indicate the trade, service, or material provided by the subcontractor.
- **SubContractor/SubConsultant/Supplier.** Please indicate status of firm on this contract.
- **Federal ID.** A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **Company Name, Address, Phone & Fax**. Provide company information for verification of payments.
- **Total Subcontract Amount.** Provide total amount of subcontract for subcontractor including change orders.
- **Amount Paid To Date.** Indicate all dollars paid to date for the subcontractor.
- **Amount Pending, Previously Reported.** Indicate any amount previously reported that payments are pending.
- **Amount To Be Paid for this Period.** Provide dollar amount of dollars requested for the pay period.
- **Sub Pay Period Ending Date.** Provide date for which subcontractor invoiced performed work.

Forms must be signed and dated or will be considered incomplete. The company authorized representative must sign and certify the information is true and accurate. Failure to sign this document or return the document unsigned can be cause for determining a company is in non-compliance of Ordinance 2008-89.

If any additional information is required or you have any questions, you may call the Office of Equal Business Opportunity at (813) 274-5522.

AFFIDAVIT OF COMPLIANCE WITH FOREIGN COUNTRIES OF CONCERN PURSUANT TO SECTION 287.138, FLORIDA STATUTES, CONVICTED VENDOR LIST (PUBLIC ENTITY CRIME) PURSUANT TO SECTION 287.133, FLORIDA STATUTES, PROHIBITION AGAINST CONTRACTING WITH SCRUTINIZED COMPANIES PURSUANT TO SECTION 287.135, FLORIDA STATUTES, PROHIBITION AGAINST HUMAN TRAFFICKING PURSUANT TO SECTION 787.06, FLORIDA STATUTES, AND COMPLIANCE WITH E-VERIFY PURSUANT TO SECTION 448.095, FLORIDA STATUTES

The undersigned Affiant, on behalf of the Entity listed below ("Entity"), hereby attests under penalty of perjury as follows:

Public Entity Crimes

1. Affiant understands that a "person" or "affiliate" who has been placed on the "convicted vendor list" following a "conviction" for a "public entity crime" (as those terms are defined in Section 287.133, Florida Statutes) for a period of 36 months following the date of being placed on the convicted vendor list, is ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa. Entities placed on either the "discriminatory vendor list" or "antitrust vendor list" are ineligible to transact business with the City of Tampa.
2. Affiant understands and attests that neither Affiant, nor any person or affiliate of the Entity, nor the Entity have been placed on any of the above referenced vendor lists that would render the Entity ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa.

Scrutinized Companies

3. Affiant understands that pursuant to Section 287.135(2)(a), Florida Statutes, the Entity would be ineligible to contract with or submit a bid, proposal or reply to contract with the City of Tampa if the Entity is on the "Scrutinized Companies that Boycott Israel List" (created pursuant to Section 215.4725, Florida Statutes) or is engaged in a boycott of Israel. If the value of the contract is one million dollars or more if, at the time of bidding on, submitting a proposal or reply for, or entering into or renewing a contract, the Entity:
    a. Is on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, created pursuant to Section 215.473, Florida Statutes; or
    b. Is engaged in business operations in Cuba or Syria.

4. Affiant attests that neither Affiant nor the Entity are on the Scrutinized Companies that Boycott Israel List, Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in Iran Terrorism Sectors List, nor are we engaged in a boycott of Israel, and understand that any resulting contract may be terminated for a falsification of this Affidavit.

E-Verify

5. Affiant understands and attests that pursuant to Section 448.095(5), Florida Statutes, the Entity must comply with Florida's E-Verify law to enter into a contract with the City of Tampa.
6. The undersigned Entity is registered with and uses the United States Department of Homeland Security's E-Verify system to verify the work authorization status of all new employees.
7. No public employer has terminated a contract with the Entity pursuant to Section 448.095(5), Florida Statutes, within the year immediately preceding the date of contracting or submitting a bid, proposal or replay to contract with the City of Tampa.
8. Entity is currently in compliance and will remain in compliance, for the duration of any contract with

the City of Tampa, with all requirements of Section 448.095(5), Florida Statutes.

9. Affiant understands and attests that, if there is a good faith belief that the Entity has knowingly violated Section 448.09(1), Florida Statutes, there is an obligation on the part of the City of Tampa to terminate a contract pursuant to Section 448.095(5), Florida Statutes.
10. Affiant understands and attests that, if there is a good faith belief that one of Entity's subcontractor(s) has knowingly violated the Section 448.09(1), Florida Statutes, but the Entity has otherwise complied with its obligations thereunder, then the Entity will be required to immediately terminate the contract with the subcontractor in order to continue providing services to the City of Tampa.

Anti-Human Trafficking

11. Affiant hereby understands and attests that the undersigned Entity does not use coercion of labor or services as those terms are defined in section 787.06(13), Florida Statutes.

Compliance with Foreign Countries of Concern

12. Affiant, on behalf of the Entity attest to the following:
    a. Entity is not owned by the government of a foreign country of concern as defined in Section 287.138, Florida Statutes. (Source: § 287.138(2)(a), Florida Statutes.)

    b. The government of a foreign country of concern does not have a controlling interest in Entity. (Source: § 287.138(2)(b), Florida Statutes.)

    c. Entity is not organized under the laws of, and does not have a principal place of business in a foreign country of concern. (Source: § 287.138(2)(c), Florida Statutes.)

The undersigned is authorized to execute this Affidavit on behalf of Entity.

The undersigned further sayeth naught.

Date: 09-30-24 (Affiant) Signed: _____

Entity: TOPLINE RECREATION Name: SONIA PERKINS

Title: PRESIDENT

STATE OF FL
COUNTY OF VOLUSIA

SWORN to (or affirmed) and subscribed before me, by means of ☒ physical presence or ☐ online notarization, this 30 day of SEP, 2024, by SONIA PERKINS, as PRESIDENT, who is personally known to me or who has produced _____ as identification.

[AFFIX NOTARY SEAL/STAMP]

JENNIFER JANELLE
Commission # HH 379138
Expires March 27, 2027

_____
Signature of Notary
Name: Jennifer Janelle
(Print or Type Name)
Notary Public: State of Florida
My Commission Expires 3/27/27

#VDT8QQYV0D2EO7v1

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 12/3/2024

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
Cooper Risk Advisors, LLC
PO Box 638
904 N Main Street
Lapel IN 46051

CONTACT NAME: Bill Hodgkins
PHONE (A/C, No, Ext): 321-214-1990
FAX (A/C, No): 765-534-2067
E-MAIL ADDRESS: billh@cooperindiana.com

INSURED TOPLINE-01
Top Line Recreation, Inc.
2922 Howland Blvd., Suite 3
Deltona FL 32725

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Cincinnati Specialty Un Ins Co	13037
INSURER B : Old Dominion Insurance Company	40231
INSURER C : Evanston Insurance Company	35378
INSURER D :	
INSURER E :	
INSURER F :	

COVERAGES **CERTIFICATE NUMBER:** 342430475 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY	Y	Y	CSU0142752	11/21/2024	11/21/2025	EACH OCCURRENCE	$ 1,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
							MED EXP (Any one person)	$ 1,000
							PERSONAL & ADV INJURY	$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 3,000,000
	POLICY X PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$ 3,000,000
	OTHER:							$
B	AUTOMOBILE LIABILITY	Y	Y	CA00021590	1/1/2025	1/1/2026	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	X ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	X HIRED AUTOS ONLY / X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
C	UMBRELLA LIAB X OCCUR	Y	Y	EZXS3137652	11/21/2024	11/21/2025	EACH OCCURRENCE	$ 4,000,000
	X EXCESS LIAB CLAIMS-MADE						AGGREGATE	$ 4,000,000
	DED X RETENTION $ $0.00							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y / N					PER STATUTE / OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	☐ N / A					E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$
A	Professional Liability/E&O			CSU0142752	11/21/2024	11/21/2025	Occurrence	1,000,000
							Aggregate	3,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
The City of Tampa, its elected officials, departments, officers, and employees are additional insureds with respect to general liability and auto liability per written contract, as to liability arising out of work or operations performed by or on behalf of Firm including materials, parts, or equipment furnished in connection with such work or operations and automobiles owned, leased, hired or borrowed by or on behalf of Firm. Thirty day notice of cancellation to certificate holder for any legal reason, ten days notice of non-payment of premium. Waiver of subrogation applies in favor of the additional insureds for auto and general liability, if required by written contract. Bid# 31041421

CERTIFICATE HOLDER

City of Tampa
Insurance Compliance
PO Box 100085 - ZS
Duluth GA 30096
USA

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

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From: Sarah Okon SMTP:sarah@cooperindiana.com
To: CityofTampa CityofTampa@Ebix.com
CC: soniap@toplinerec.com
Subject: RE: City of Tampa Insurance Request - 453009109
Date: 12/3/2024 5:12:12 AM
Attachment(s):

You don't often get email from sarah@cooperindiana.com. Learn why this is important

CAUTION: This email originated from outside of the organization! DO NOT click on links or open attachments unless you were expecting the email, recognize the sender, and know the content is safe.

Good Morning,

Please see the attached certificate of insurance as requested and let me know if anything additional is needed.

Thank you!

Sarah Okon, Account Manager
Cooper Risk Advisors
904 N. Main St.
Lapel, IN 46051
765-534-3152 Ext. 107
765-534-2067 (Fax)
sarah@cooperindiana.com
www.cooperriskadvisors.com



*Please be advised that coverage cannot be bound, altered or amended via email, phone, text or
other electronic media without the consent and acknowledgement of Cooper Risk Advisors, LLC.

From: TOP LINE RECREATION <soniap@toplinerec.com>
Sent: Monday, December 2, 2024 10:47 AM
To: Sarah Okon <sarah@cooperindiana.com>
Subject: FW: City of Tampa Insurance Request - 453009109

Good Morning Sarah,
Please send the updated COI for City of Tampa as request below.

Thank you



From: Terry Perkins <terryp@toplinerec.com>
Sent: Monday, December 2, 2024 8:34 AM
To: TOP LINE RECREATION <soniap@toplinerec.com>
Subject: FW: City of Tampa Insurance Request - 453009109

From: Customer Service <cityoftampa@ebix.com>
Sent: Thursday, November 28, 2024 7:55 AM
To: terryp@toplinerec.com
Subject: City of Tampa Insurance Request - 453009109

The attached notice is being sent to you on behalf of City of Tampa by Ebix RCS. City of Tampa has engaged with Ebix to manage insurance compliance verification on its behalf. You must be properly insured while doing business with City of Tampa and comply with insurance requirements.

As of the date of this notice we have not received proper evidence of insurance coverage. Please review the attached notice as it includes the information needed for compliance and where to send your certificate of insurance.

Instructions: The attached notice is being sent to you and your agent, if we have their email address on file. Please send certificates of insurance electronically to email address referenced below; **certificates sent through USPS will not be accepted/processed.**

Agent Instructions: Please review the attached notice as it includes the information needed for compliance. Please send certificates of insurance electronically to email address referenced below; **certificates sent through USPS will not be accepted/processed.**

Please send your certificate of insurance via email to _____ if you have any questions, please contact Ebix by calling (951) 652-8127; thank you for your prompt attention to this matter.

Ebix ,Inc. | One Ebix way | Johns Creek, GA 30097 |Web-

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US - PER CONTRACT

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

The following is added to Paragraph **8. Transfer of Rights of Recovery Against Others to** Us of **SECTION IV - CONDITIONS:**

If you have agreed, in a written contract or agreement, to provide a waiver of any right of recovery against a person or organization, we will waive any right of recovery we may have against that person or organization because of payments we make for injury or damage arising out of your ongoing operations or "your work" done under a contract with that person or organization and included in the "products-completed operations hazard". This waiver applies only to that person or organization for which you have agreed to in a written contract to provide said waiver.

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED(S) - OWNERS, LESSEES OR CONTRACTORS - AUTOMATIC STATUS FOR OTHER PARTIES WHEN REQUIRED IN CONSTRUCTION AGREEMENT WITH YOU - OPERATIONS AND COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

A. **Section II – Who Is An Insured** is amended to include as an additional insured:

1. Any person or organization for whom you are performing operations when you and such person or organization have agreed in writing in a contract or agreement that such person or organization be added as an additional insured on your policy; and
2. Any other person or organization you are required to add as an additional insured under the contract or agreement described in Paragraph **1.** above.

Such person(s) or organization(s) is an additional insured only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions in the performance of your ongoing operations for the additional insured described in Paragraph **1.** or **2.** above;
2. The acts or omissions of those acting on your behalf in the performance of your ongoing operations for the additional insured described in Paragraph **1.** or **2.** above; or
3. "Your work" performed for the additional insured described in Paragraph **1.** or **2.** above and included in the "products-completed operations hazard".

If not specified otherwise in the written contract or agreement described in **A.1.** of this endorsement, a person's or organization's status as an additional insured under this endorsement ends one year after your operations for the additional insured(s) are completed. The written contract or agreement must be currently in effect or become effective during the term of this Coverage Part. The contract or agreement must be executed prior to the "bodily injury", "property damage" or "personal and advertising injury" to which this endorsement pertains.

However:

1. The insurance afforded to such additional insured described above only applies to the extent permitted by law; and
2. If coverage provided to an additional insured described above is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide.

B. With respect to the insurance afforded to these additional insured(s), the following additional exclusions apply:

This insurance does not apply to:

1. "Bodily injury", "property damage" or "personal and advertising injury" arising out of the rendering of, or the failure to render, any professional architectural, engineering or surveying services, including:
   a. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; or
   b. Supervisory, inspection, architectural or engineering activities.
2. "Bodily injury" or "property damage" arising out of "your work" for which a consolidated (wrap-up) insurance program has been provided by the prime contractor/project manager or owner of the construction project in which you are involved.
3. "Bodily injury", "property damage" or "personal and advertising injury" to any employee of you or to any obligation of an additional insured to indemnify another because of damages arising out of such injury.

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4. "Bodily injury", "property damage" or "personal and advertising injury" for which the Named Insured is afforded no coverage under this policy of insurance.

C. With respect to the insurance afforded to these additional insureds, **SECTION III - LIMITS OF INSURANCE** is amended to include:

The limits applicable to an additional insured described herein are those specified in the written contract or agreement described in **A.1.** of this endorsement or in the Declarations of this Coverage Part, whichever is less. If no limits are specified in the written contract or agreement, the limits applicable to the additional insured(s) are those specified in the Declarations of this Coverage Part. The limits of insurance are inclusive of and not in addition to the limits of insurance shown in the Declarations.

D. With respect to the insurance afforded to these additional insured(s), **SECTION IV - COMMERCIAL GENERAL LIABILITY CONDITIONS, 4. Other Insurance** is amended to include:

Any coverage provided herein will be excess over any other valid and collectible insurance available to an additional insured whether primary, excess, contingent or on any other basis unless you have agreed in a written contract or written agreement executed prior to any loss that this insurance will be primary. This insurance will be noncontributory only if you have so agreed in a written contract or written agreement executed prior to any loss and this coverage is determined to be primary.

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

COMMERCIAL AUTOMOBILE ELITE *PLUS* ENDORSEMENT

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by this endorsement.

1. BROAD FORM INSURED

A. Subsidiaries and Newly Acquired or Formed Organizations

The Named Insured shown in the Declarations is amended to include:

(1) Any legally incorporated subsidiary in which you own more than 50% of the voting stock on the effective date of the Coverage Form. However, the Named Insured does not include any subsidiary:

(a) That is an "insured" under any other automobile policy or

(b) That would be an "insured" under such a policy but for (i) its termination or (ii) the exhaustion of its Limit of Insurance.

(2) Any organization that is acquired or formed by you and over which you maintain majority ownership. However, the Named Insured does not include any newly formed or acquired organization:

(a) That is a partnership, joint venture or limited liability company,

(b) That is an "insured" under any other policy,

(c) That has exhausted its Limit of Insurance under any other policy, or

(d) 180 days or more after its acquisition or formation by you, unless you have given us notice of the acquisition or formation.

Coverage does not apply to "bodily injury" or "property damage" that results from an "accident" that occurred before you formed or acquired the organization.

B. Employees as Insureds

Paragraph **A.1. - WHO IS AN INSURED OF SECTION** II **- LIABILITY COVERAGE** is amended to add:

Any "employee" of yours while using a covered "auto" you don't own, hire or borrow in your business or your personal affairs.

C. Lessors as Insureds

Paragraph **A.1 - WHO IS AN INSURED OF SECTION** II **- LIABILITY COVERAGE** is amended to add:

e. The lessor of a covered "auto" while the "auto" is leased to you under a written agreement if:

(1) The agreement requires you to provide direct primary insurance for the lessor and

(2) The "auto" is leased without a driver. Such a leased "auto" will be considered a covered "auto" you own and not a covered "auto" you hire.

2. ADDITIONAL INSURED BY CONTRACT, PERMIT OR AGREEMENT

The following is added to **A.1 WHO IS AN INSURED OF SECTION II - LIABILITY COVERAGE**:

Any person or organization for whom you are required to name as an additional insured in a written contract or agreement that is executed or signed by you prior to a "bodily injury" or "property damage" occurrence is an "insured" for liability coverage, but only to the extent that person or organization qualifies as an "insured" under the **Who Is An Insured** provision contained in **Section II** of the coverage form.

If specifically required by the written contract or agreement referenced in the paragraph above, any coverage provided by this endorsement to

an additional insured shall be primary and any other valid and collectible insurance available to the additional insured shall be non-contributory with this insurance. If the written contract does not require this coverage to be primary and the additional insured's coverage to be non-contributory, then this insurance will be excess over any other valid and collectible insurance available to the additional insured.

3. AUTOS RENTED BY EMPLOYEES

Any "auto" hired or rented by your "employee" on your behalf and at your direction will be considered an "auto" you hire.

The **OTHER INSURANCE** Condition is amended by adding the following:

If an "employee's" personal insurance also applies on an excess basis to a covered "auto" hired or rented by your "employee" on your behalf and at your direction, this insurance will be primary to the "employee's" personal insurance.

4. HIRED AUTO PHYSICAL DAMAGE COVERAGE

If hired "autos" are covered "autos" for Liability Coverage and if Comprehensive, Specified Causes of Loss, or Collision coverages are provided under this Coverage Form for any "auto" you own, then the Physical Damage coverages provided are extended to "autos" you hire or borrow, subject to the following limit. The most we will pay for "loss" to any hired "auto" is:

(1) $50,000;

(2) The actual cash value of the damaged or stolen property at the time of the "loss"; or

(3) The cost of repairing or replacing the damaged or stolen property,

whichever is smallest, minus a deductible. The deductible will be equal to the largest deductible applicable to any owned "auto" for that coverage. No deductible applies to "loss" caused by fire or lightning. Hired Auto Physical Damage coverage is excess over any other collectible insurance. Subject to the above limit, deductible and excess provisions, we will provide coverage equal to the broadest coverage applicable to any covered "auto" you own.

We will also cover loss of use of the hired "auto" if it results from an "accident", you are legally liable and the lessor incurs an actual financial loss, subject to a maximum of $1,000 per "accident".

This extension of coverage does not apply to any "auto" you hire or borrow from any of your "employees", partners (if you are a partnership), members (if you are a limited liability company), or members of their households.

5. PHYSICAL DAMAGE – ADDITIONAL TEMPORARY TRANSPORTATION EXPENSE COVERAGE

Paragraph **A.4.a. OF SECTION III – PHYSICAL DAMAGE COVERAGE** is amended to provide a limit of $75 per day and a maximum limit of $2,250.

6. EXTRA EXPENSE – BROADENED COVERAGE

Under paragraph **A. OF SECTION III – PHYSICAL DAMAGE COVERAGE**, the following Coverage is added:

We will pay for the expense of returning a stolen covered "auto" to you subject to Paragraph C. Limit of Insurance.

7. LOAN/LEASE GAP COVERAGE

Under **SECTION III - PHYSICAL DAMAGE COVERAGE**, if a long-term leased or financed "auto" is a covered "auto", we will pay in the event of a total "loss" your additional legal obligation to the lessor or loss payee for any difference between the actual cash value of the "auto" at the time of the "loss" and the "outstanding balance" of the lease.

"Outstanding balance" means the amount you owe on the lease at the time of "loss" less any amounts representing taxes; overdue payments; penalties, interest or charges resulting from overdue payments; additional mileage charges; excess wear and tear charges; lease termination fees.

8. AIRBAG COVERAGE

Under Paragraph **B. Exclusions** of **SECTION III - PHYSICAL DAMAGE COVERAGE**, the following is added:

The exclusion relating to mechanical breakdown does not apply to the accidental discharge of an air bag.

9. AMENDED DUTIES IN THE EVENT OF ACCIDENT, CLAIM, SUIT, OR LOSS

The requirement in **LOSS CONDITIONS 2.a – DUTIES IN THE EVENT OF ACCIDENT, CLAIM, SUIT, OR LOSS – of SECTION IV – BUSINESS AUTO CONDITIONS** that you must notify us of an "accident" applies only when the "accident" is known to:

(1) You, if you are an individual

(2) A partner, if you are a partnership; or

(3) A member, if you are a limited liability company; or

(4) An executive officer or insurance manager, if you are a corporation.

10. UNINTENTIONAL FAILURE TO DISCLOSE HAZARDS

If you unintentionally fail to disclose any hazards existing at the inception date of your policy, we will not deny coverage under this Coverage Form because of such failure.

11. WAIVER OF SUBROGATION

Transfer Of Rights Of Recovery Against Others To Us of **SECTION IV – BUSINESS AUTO CONDITIONS** is amended by adding the following:

We waive any right of recovery we may have against any person or organization to or for whom we make payment and with whom you have a written contract that requires such waiver because of payments we make for damages under this Coverage Form.

12. RESULTANT MENTAL ANGUISH COVERAGE

The definition of "bodily injury" in **SECTION V – DEFINITIONS** is replaced by the following:

"Bodily injury" means bodily injury, sickness, or disease sustained by any person, including mental anguish or death resulting from any of these.

13. NOTICE OF CANCELLATION TO THIRD PARTY

The following is added to **A.2., Cancellation** of **COMMON POLICY CONDITIONS**

If we initiate a cancellation or non-renewal for any reason, other than non-payment of premium, we will mail notice of cancellation to the person or organization scheduled on the policy as an additional insured 30 days before the effective date of cancellation. We will mail such notice to the address of the Additional Insured scheduled on the policy and in at least 30 days before the effective date of the cancellation or non-renewal.

If the Insured initiates the cancellation or in case of non-payment of premium, we will not mail advance notice but, a final cancellation notice will be sent to the person or organization scheduled on the policy as an additional insured. We will mail such notice to the additional insured address upon final cancellation of the policy.

14. VEHICLE WRAP COVERAGE

Paragraph **A. Coverage** of **Section III – PHYSICAL DAMAGE COVERAGE** is amended to include the following additional paragraph:

Vehicle Wrap

In the event of a "loss" to a covered "auto", we will provide the following coverage if such "loss" is caused by:

a. Other than collision only if the Declarations indicates that comprehensive Coverage is provided for the covered "auto";

b. Specified Causes of Loss only if the Declarations indicates that Specified Causes Of Loss Coverage is provided for the covered "auto"; or

c. Collision only if the Declarations indicates that Collision Coverage is provided for the covered "auto".

We will pay for "loss" to a "vehicle wrap" that is installed on the covered "auto". The most we will pay for "loss" is $5,000 per policy period.

We will not pay for "loss" due to and confined to wear and tear; or damage to paint or the vehicle caused by faulty installation of a "vehicle wrap".

The "vehicle wrap" is subject to the Comprehensive deductible for the covered "auto", except in the event of a "loss" to a covered "auto" for which such vehicle is involved in a collision and there is both:

(1) Collision damage to the vehicle; and

(2) Damage to the "vehicle wrap"

Then the collision deductible will apply.

If the "vehicle wrap" is damaged in a collision the lesser of replacement cost or original purchase cost of the "vehicle wrap" will apply.

SECTION V. DEFINITIONS is amended to include the following additional definition.

"Vehicle Wrap" means self-adhesive vinyl decals or sheets applied to the exterior body or window of a covered "auto". Signs or other graphics painted or magnetically affixed to the vehicle are not considered vehicle wraps.

15. GARAGEKEEPERS

The most current version of endorsement CA 99 37 that is approved in your state is added to the policy on an Excess insurance basis with a maximum limit of $10,000 and a $500 deductible for each Customer's Auto for all perils. The limit is applicable on a blanket basis to all Insured owned locations.

16. ORIGINAL EQUIPMENT MANUFACTURER REPLACEMENT PARTS

SECTION III – PHYSICAL DAMAGE COVERAGE, C. Limit of Insurance, Paragraph 1. Is amended to include:

However, if the covered "auto" has less than 36,000 miles on its odometer, then the following condition will apply:

We will pay the cost to replace the damaged parts (excluding glass and mechanical parts) with new Original Equipment Manufacturer replacement parts if the damaged parts cannot be repaired.

17. FIRE DEPARTMENT SERVICE CHARGE

Paragraph **A.4. Coverage Extensions** of **SECTION III – PHYSICAL DAMAGE COVERAGE** is amended by adding the following:

c. Fire Department Service Charge

When a fire department is called to save or protect a covered "auto", its equipment, its contents, or occupants from a covered cause of loss, we will pay up to $1,500 for your liability for fire department service charges:

(1) Assumed by contract or agreement prior to loss; or

(2) Required by local ordinance

No deductible applies to this additional coverage.

18. LOSS OF USE TO RENTAL CAR

Paragraph **A.4. Coverage Extensions** of **SECTION III – PHYSICAL DAMAGE COVERAGE** is amended to add the following:

d. Rental Expense

We will pay the following expenses that you or any of your "employees" are legally obligated to pay because of a written contract or agreement entered into for use of a rental vehicle in the conduct of your business:

MAXIMUM WE WILL PAY FOR ANY ONE CONTRACT OR AGREEMENT:

1. $1,000 for loss of income incurred by the rental agency during the period of time that vehicle is out of use because of actual damage to, or "loss" of, that vehicle, including income lost due to absence of that vehicle for use as a replacement;

2. $500 for administrative expenses incurred by the rental agency, as stated in the contract or agreement

19. EXTENDED COVERAGE – BAIL BONDS

Paragraph **A.2.a. (2)** of **SECTION II – LIABILITY COVERAGE** is replaced by the following:

(2) Up to $3,000 for cost of bail bonds (including bonds for related traffic law violations) required because of an "accident" we cover. We do not have to furnish these bonds

20. EXTENDED COVERAGE – LOSS OF EARNINGS

Paragraph **A.2.a. (4) of SECTION II – LIABILITY COVERAGE** is replaced by the following:

(4) All reasonable expenses incurred by the "insured" at our request, including actual loss of earnings up to $500 a day because of time off from work.

21. LOCKOUT REIMBURSEMENT COVERAGE

We will reimburse up to $75 per occurrence to cover your actual expenses incurred when a locksmith must be called:

(1) To open a covered "auto" because the keys are locked inside the auto; or

(2) To make a key for a covered "auto" because the key has been lost or stolen.

No deductible applies

22. NON-OWNED TRAILER – INCREASED LOAD CAPACITY

The following is added to C. of **SECTION I – COVERED AUTOS**:

Non-owned "trailers" with a load capacity of 5,000 pounds or less designed primarily for travel on public roads

23. EXTENDED COVERAGE – BUSINESS PERSONAL PROPERTY AND PERSONAL EFFECTS

Paragraph **A.4** of **SECTION III - PHYSICAL DAMAGE COVERAGE** is amended by the following:

Physical Damage Coverage on a covered "auto" may be extended to "loss" to your "business personal property" or "personal effects", not otherwise covered in the policy or, if you are an indvidual, the personal property of a family member, that is in the covered "auto" at the time of "loss". The most we will pay for any one "loss" under this coverage extension is $500.

SECTION V - DEFINITIONS is amended by adding the following:

"Business Personal Property" and "Personal Effects" means tangible property that is worn or carried by an "insured". It does not include tools, jewelry, money or securities.

24. RENTAL REIMBURSEMENT COVERAGE

SECTION III – PHYSICAL DAMAGE COVERAGE is amended by the addition of the following:

(1) We will pay for rental reimbursement expenses incurred by you for the rental of an "auto" because of "loss" to a covered "auto." Payment applies in addition to the otherwise applicable amount of each coverage you have on a covered "auto." No deductibles apply to this coverage.

(2) We will pay only for those expenses incurred during the policy period beginning 24 hours after the "loss" and ending, regardless of the policy's expiration, with the lesser of the following number of days:

(a) The number of days reasonably required to repair or replace the covered "auto." If "loss" is caused by theft, this number of days is added to the number of days it takes to locate the covered "auto" and return it to you; or

(b) 30 days.

(3) Our payment is limited to the lesser of the following amounts:

(a) Necessary and actual expenses incurred; or

(b) $50 per day.

(c) The Maximum Payment is $1,500

(4) This coverage does not apply while there are spare or reserve "autos" available to you for your operations.

(5) If "loss" results from the total theft of a covered "auto" of the private passenger type, we will pay under this coverage only that amount of your rental reimbursement expenses which is not already provided for under the PHYSICAL DAMAGE COVERAGE Extension.

If Rental Reimbursement Coverage is already on the policy at higher limits, then that coverage replaces, and is not added to, the coverage provided above.

25. TEMPORARY SUBSTITUTE PHYSICAL DAMAGE

Paragraph **C.** of **SECTION I – COVERED AUTOS** is amended by the addition of the following:

If Physical Damage Coverage is provided by this Coverage Form, the following type of vehicle is also a covered "auto" for Physical Damage Coverage:

Any "auto" you do not own while used with the permission of its owner as a temporary substitute for a covered "auto" you own that is out of service because of its:

a. Breakdown
b. Repair
c. Servicing
d. "Loss"; or
e. Destruction

26. TOWING AND LABOR COVERAGE

Paragraph **A.2.** of **SECTION III – PHYSICAL DAMAGE COVERAGE** is replaced by the following:

We will pay up to $200 for towing and labor costs incurred each time a covered "auto" of the private passenger type or a truck of less than

20,000 pounds gross vehicle weight is disabled. However, the labor must be performed at the place of disablement.

27. NEW AUTO REPLACEMENT

In the event of a total loss to your "new" "auto" of the private passenger type or a truck of less than 10,000 pounds gross vehicle weight to which this coverage applies, as show in the Declarations, we will pay at your option either:

1. The verifiable new "auto" purchase price of your damaged auto, not including any insurance or warranties purchased; or

2. The purchase price, as negotiated by us, of a new "auto" of the same or similar make, model and equipment, not including any furnishing, parts or equipment not installed by the manufacturer or manufacturer's dealership;

This coverage is provided without deduction for depreciation.

CONDITIONS

"New" means an "auto" in which you are the original owner and the "auto" has not been previously titled.

Coverage under this endorsement shall be applicable:

1. for no more than 365 days from the date of purchase of the "auto" to which it applies, plus the remainder of the policy term in which the 365th day from purchase ends, and;

2. When the "auto" has less than 15,000 miles

All other provisions of this policy apply.

28. DRIVE OTHER CAR FOR EXECUTIVE OFFICERS

A. Changes In Covered Autos Liability Coverage

Any "auto" you do not own, hire or borrow is a covered "auto" for Liability Coverage while being used by any of your "executive officers", except:

a. Any "auto" owned by that "executive officer" or any "family member", or

b. Any "auto" used by that "executive officer" while working in a business of selling, servicing, repairing or parking "autos".

B. Changes In Auto Medical Payments and Uninsured and Underinsured Motorists Coverage

The following is added to **Who Is An Insured**:

Any "executive officer" is "insured" while "occupying" or while a pedestrian when being struck by any "auto" you do not own except:

Any "auto" owned by that "executive" or by any "family member".

C. Changes In Physical Damage Coverage

Any private passenger type "auto" you do not own, hire or borrow is a covered "auto" while in the care, custody or control of any of your "executive officers" except:

(1) Any "auto" owned by that "executive officer" or any "family member".

(2) Any "auto" owned by that "executive officer" while working in a business of selling, servicing, repairing or parking "autos".

D. Additional Definitions:

As used in this endorsement:

"Executive officer" means a person holding any of the officer positions created by your charter, constitution, by-laws or any other similar governing document, and that person's spouse, while a resident of the same household.

"Family member" means a person related to the "executive officer" by blood, marriage or adoption who is a resident of the "executive officer's" household including a ward or foster child.

E. The Insurance provided under this provision will be:

Equal to the broadest of those coverages afforded any covered "auto", and Excess over any other collectible insurance.

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 06/04/2024

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	CONTACT NAME:	
Marsh McLennan Agency, LLC - Bouchard Region 101 North Starcrest Drive Clearwater, FL 33765	PHONE (A/C, No, Ext): (727) 447-6461	FAX (A/C, No):
	E-MAIL ADDRESS:	

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : American Zurich Insurance Company	40142
INSURER B :	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
Frank/Crum II, Inc. Alt. Emp: Topline Recreation Inc.
100 South Missouri Avenue
Clearwater, FL 33756

COVERAGES **CERTIFICATE NUMBER:** 24FL0801030846 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	$
	CLAIMS-MADE OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$
	POLICY PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$
	OTHER:							$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	$
	DED RETENTION $							$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y / N If yes, describe under DESCRIPTION OF OPERATIONS below			WC 47-58-512-13	06/01/2024	06/01/2025	X PER STATUTE / OTH-ER	
		N / A					E.L. EACH ACCIDENT	$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000
				Location Coverage Period:	06/01/2024	06/01/2025	**Client#** 81940-FL	

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

Coverage is provided for only those co-employees of, but not subcontractors to:
Topline Recreation Inc.
2922 Howland Blvd Ste 3
Deltona, FL 32725

CERTIFICATE HOLDER

City of Tampa. Insurance Compliance
P.O Box 100085-ZS
Tampa, FL 33602

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

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From: TOP LINE RECREATION SMTP:soniap@toplinerec.com
To: CityofTampa CityofTampa@Ebix.com
CC:
Subject: RE: City of Tampa Insurance Request - 453009109
Date: 6/4/2024 12:08:05 PM
Attachment(s):

You don't often get email from soniap@toplinerec.com. Learn why this is important

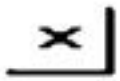
CAUTION: This email originated from outside of the organization! DO NOT click on links or open attachments unless you were expecting the email, recognize the sender, and know the content is safe.

Updated COI attached.
Thank you



From: Terry Perkins <terryp@toplinerec.com>
Sent: Tuesday, June 4, 2024 9:19 AM
To: TOP LINE RECREATION <soniap@toplinerec.com>; Orders Orders <orders@toplinerec.com>
Subject: FW: City of Tampa Insurance Request - 453009109

Top Line Recreation
Terry R. Perkins
Vice President
Certified CPSI
Terryp@toplinerec.com
M: 407-466-2909
O: 386-789-4508
MBE Certified
www.toplinerec.com





From: Customer Service <cityoftampa@ebix.com>
Sent: Thursday, May 23, 2024 4:02 PM
To: terryp@toplinerec.com
Subject: City of Tampa Insurance Request - 453009109

The attached notice is being sent to you on behalf of City of Tampa by Ebix RCS. City of Tampa has engaged with Ebix to manage insurance compliance verification on its behalf. You must be properly insured while doing business with City of Tampa and comply with insurance requirements.

As of the date of this notice we have not received proper evidence of insurance coverage. Please review the attached notice as it includes the information needed for compliance and where to send your certificate of insurance.

Instructions: The attached notice is being sent to you and your agent, if we have their email address on file. Please send certificates of insurance electronically to email address referenced below; **certificates sent through USPS will not be accepted/processed.**

Agent Instructions: Please review the attached notice as it includes the information needed for compliance. Please send certificates of insurance electronically to email address referenced below; **certificates sent through USPS will not be accepted/processed.**

Please send your certificate of insurance via email to _____ if you have any questions, please contact Ebix by calling (951) 652-8127; thank you for your prompt attention to this matter.

EBIX **Ebix ,Inc. | One Ebix way | Johns Creek, GA 30097 |Web-**

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 06/04/2024

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PRODUCER	CONTACT NAME:	
Marsh McLennan Agency, LLC - Bouchard Region 101 North Starcrest Drive Clearwater, FL 33765	PHONE (A/C, No, Ext): (727) 447-6461	FAX (A/C, No):
	E-MAIL ADDRESS:	

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : American Zurich Insurance Company	40142
INSURER B :	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
Frank/Crum II, Inc. Alt. Emp: Topline Recreation Inc.
100 South Missouri Avenue
Clearwater, FL 33756

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INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
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	CLAIMS-MADE OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$
	POLICY PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$
	OTHER:							$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	$
	DED RETENTION $							$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y / N If yes, describe under DESCRIPTION OF OPERATIONS below			WC 47-58-512-13	06/01/2024	06/01/2025	X PER STATUTE / OTH-ER	
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				Location Coverage Period:	06/01/2024	06/01/2025	**Client#** 81940-FL	

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

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Deltona, FL 32725

CERTIFICATE HOLDER

City of Tampa. Insurance Compliance
P.O Box 100085-ZS
Tampa, FL 33602

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AUTHORIZED REPRESENTATIVE

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To: CityofTampa CityofTampa@Ebix.com
CC:
Subject: RE: City of Tampa Insurance Request - 453009109
Date: 6/4/2024 12:08:05 PM
Attachment(s):

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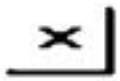
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Updated COI attached.
Thank you



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Sent: Tuesday, June 4, 2024 9:19 AM
To: TOP LINE RECREATION <soniap@toplinerec.com>; Orders Orders <orders@toplinerec.com>
Subject: FW: City of Tampa Insurance Request - 453009109

Top Line Recreation
Terry R. Perkins
Vice President
Certified CPSI
Terryp@toplinerec.com
M: 407-466-2909
O: 386-789-4508
MBE Certified
www.toplinerec.com





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To: terryp@toplinerec.com
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EBIX **Ebix ,Inc. | One Ebix way | Johns Creek, GA 30097 |Web-**

Keystone Ridge

BIDDER'S AFFIDAVIT

Before me, the undersigned authority who is duly authorized by law to administer oaths and take acknowledgements, personally appeared

Arthur C. Slear

AFFIANT'S NAME (PERSON'S NAME)

Who, after being duly cautioned and sworn, and being fully aware of the penalties of perjury, does hereby depose and declare, on his/her own behalf or as a representative on behalf of a partnership or corporation, or other entity that is the Bidder in the matter at hand, as follows:

1. That the Bidder, if a natural person, is of lawful age.

2. That if the Bidder is a partnership, or a corporation, or other legal person or entity recognized in the State of Florida, it has complied with all laws and ordinances governing the formation and continued existence of such entities, including but not limited to, if a Florida corporation, to the filing of its Articles of Incorporation with the Florida Secretary of State and if a corporation incorporated under the laws of a state other than Florida, that it is duly authorized to do business in the State of Florida; that it is currently an active corporation or entity fully authorized to do business; and that the undersigned is representative of the corporation or entity authorized to make this affirmation and declaration and who has the power to bind said corporation or entity.

3. That if the Bidder is operating under a fictitious name, Bidder has currently complied with and any and all laws and procedures governing the operation of businesses under fictitious names in the State of Florida;

4. That the Bidder has not submitted a rigged Bid, nor engaged in collusive bidding, or a collusive bidding arrangement, or fraudulent bidding, or entered into a conspiracy in connection with this bid with any other natural person, partnership, corporation or other entity making a bid for the same purpose. The Bidder has not entered into any understanding or agreement with any other person or entity where one or more such persons or entities agrees not to bid or fixing the prices to be bid.

5. In the event that the City determines that the Bidder has participated in any collusive, deceptive or fraudulent practices in derogation of the statements in this Affidavit the City, in addition to any other remedy it may exercise, will have the right to debar the Bidder. The contract let under such circumstances shall be deemed invalid.

6. That the Bidder is not in arrears to the City of Tampa upon debt or contract and is not in default, as surety or otherwise, of any obligation to the City, Hillsborough County or the State of Florida

7. That no officer or employee of the City, either individually or through any firm, corporation or business of which he/she is a stockholder or holds office, shall receive any substantial benefit or profit out of the contract or award to this Bidder; nor does the Bidder know of any City officer or employee having any financial interest in assisting the Bidder to obtain, or in any other way effecting, the award of the contract to this Bidder.

8. That, by submitting this bid, the Bidder certifies that he/she has fully read and understands the bid method and has full knowledge of the scope, nature, and quality of work to be performed or the services to be rendered.

9. That, by submitting this Bid, Affiant certifies compliance with Section 287.135, Florida Statutes and for contracts for goods or services of $1 million or more, that the Bidder is not on the Scrutinized Companies with Activities in the Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, and is not engaged in business operations in Cuba or Syria, and that for contracts for goods or services of any amount, that the Bidder is not on the Scrutinized Companies that Boycott Israel List, and is not engaged in a boycott of Israel. Affiant understands that pursuant to Section 287.135, Florida Statutes, the submission of a false certification may subject Bidder to civil penalties, attorney's fees, other costs and termination of any contract that is awarded.

The bid documents contain a General Conditions Section and may, in most cases, contain a Technical Specification Section. General Conditions contain general requirements and Technical Specifications detail the scope of the goods and/or services requested. The Technical Specifications shall always govern whenever there appears to be a conflict.

The Bidder shall comply with the applicable requirements of Federal and state laws, all Codes and Ordinances of the City of Tampa as amended from time to time and any applicable professional regulations.

FURTHER AFFIANT SAYETH NOT.

Bidder: Complete the applicable Acknowledgement for An Individual Acting In His/Her Own Right, A Partnership or A Corporation, according to your firm type.

FOR AN INDIVIDUAL ACTING IN HIS/HER OWN RIGHT

State of _____
County of _____

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization this _____ day of _____ 20____, by _____, who is personally known to me or who has produced identification and who did (did not) take an oath.

_____ Signature of Notary Public

_____ Signature of Affiant

Notary Public
State of: _____
My Commission
Expires: _____

_____ Printed, typed or stamped Commissioned name of notary public

_____ Printed or typed name of Affiant

FOR AN ENTITY

State of PA
County of Butler

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or ☐ online notarization this 13 day of April 2021, by Arthur C. Sleer, as President, of Keystone Ridge Designs a ☐ Partnership, ☐ Joint Venture, ☒ Corporation, ☐ Limited Liability Company (LLC) or ☐ Other _____, on behalf of such entity. Such individual is personally known to me or has produced identification.

Type of identification produced: Personally Known

Kimberly A. Platt
Signature of Notary Public

Signature of Affiant

Notary Public
State of: PA
My Commission
Expires: 9-22-2023

Commonwealth of Pennsylvania - Notary Seal
KIMBERLY A. PLATT, Notary Public
Butler County
My Commission Expires September 22, 2023
Commission Number 1126348

Kimberly A. Platt
Printed, typed or stamped
Commissioned name of notary public

Arthur C. Sleer
Printed or typed name of Affiant

BIDDER SUBMITTAL CHECKLIST
BID DOCUMENTS TO BE RETURNED

BID #: 31041421	
BID TITLE: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, AND INSTALLATION, REPAIRS AND REPLACEMENT	
THE FOLLOWING FORMS MUST BE INCLUDED IN BID PACKAGE PLEASE ACKNOWLEDGE BY ANSWERING "YES"	
	YES
Did you sign your bid? *	X
Did you sign and complete MBD Forms 10 and 20? *	X
Did you fully complete the price proposal /bid response page? *	X
Did you complete the Bidder's Affidavit and associated notarized form? *	X
If an addendum has been issued that changed the Bid Response Page(s), did you provide pricing on the pages marked "Addendum" *	X
Did you include catalogs, price sheets and or CD's as indicated per Technical Specification? *	X
Did you include copies of certificates and or licenses as indicated per Technical Specification? *	N/A
Did you include pricing for Engineered Fiber Wood Mulch per Technical Specification? *	N/A
Did you include Manufacture Specifications as per Technical Specification? *	N/A
Did you List pricing based on thickness and color options per Section 11 of the Technical Specifications?*	N/A
Is your company name clearly be indicated on the attached price sheet?*	X

*** Failure to submit these forms shall result in your bid being deemed as "non-responsive".**

Requested Voluntary Information Regarding
Bidder's Initial Employment Application Content

The Bidder's own initial application for employment has criminal history screening practices similar in nature to the practices contained in Chapter 12, Article VI – Criminal History Screening Practices, City of Tampa Code of Ordinances. *(Responses, whether "Yes" or "No", are for informational purposes only and will not be used as a basis of award or denial, nor as a basis for any protest)*: [_] Yes [X] No

Firm Name: Keystone Ridge Designs, Inc

Authorized signature: Angie M Mulroy Date: 4/13/2021

ATTACHMENT A - CONFLICT OF INTEREST DISCLOSURE FORM

For purposes of determining any possible conflict of interest, all bidders/proposers, must disclose if any elected or appointed officer of the City of Tampa, City of Tampa employee(s), or any immediate family member* or close personal relation** of an elected or appointed officer of the City of Tampa or City employee(s) is also an owner, corporate officer, agent, employee, stockholder, or has a controlling financial interest***, etc., of their business.

**Immediate family* means spouse, parents and children of the person involved.

***Close personal relationship* means dating, cohabitation, and/or having an intimate sexual relationship. Dating includes but is not limited to casual dating, serious dating, or casual sexual involvement where the parties have no intention of carrying on a long-term relationship, cohabitation, and any other conduct or behavior normally associated with romantic or sexual relationships. This definition applies regardless of the sexual orientation of the employees involved. Persons involved in a close personal relationship shall be referred to as a "close personal relation."

****Controlling financial interest* means ownership, directly or indirectly, to ten (10) percent or more of the outstanding capital stock in any corporation or a direct or indirect interest of ten (10) percent or more in a firm, partnership, or other business entity or such other interest or position in a business entity sufficient to allow him/her or her to control its operations.

Indicate either "yes" (a City employee, elected or appointed official is also associated with your business), or "no". If yes, give person(s) name(s) and position(s) with your business.

YES _____ NO X

NAME(S) / POSITION(S)

_____

_____

_____

_____

FIRM NAME: Keystone Ridge Designs, Inc

BY (PRINTED NAME): Angela M Maloney

BY (SIGNATURE): Angela M Maloney

TITLE: Director of Marketing

DATE: 4/13/2021

BID RESPONSE FOR
SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT

Please Print or Type

We the undersigned, as Bidders, hereby declare that we have carefully read this proposal or bid and the provisions, terms and conditions concerning the equipment, materials, supplies or services as called for, and with full knowledge and understanding of the requirements and conditions, do hereby agree to furnish and to deliver as indicated, FOB, City Facility Location, with all transportation charges prepaid, and for the prices quoted thereon as follows.

I. **Site Furnishings and Playground Equipment**	**Catalog Name**	**Date**	**Discount**
a. Catalog	KeystoneRidge Designs 2021	4/13/2021	5%
b. Catalog			
C. Catalog			
d. Catalog			
e. Catalog			
f. Catalog			

If additional space is needed, attach additional pages using headings as indicated above

2. Installation of Site Furnishings, Playground Equipment, Shelters, Shade Structures, Gazebos, and Trellises, Etc. To be based on a firm fixed percentage of the equipment cost (the total cost after discount has been taken, but before freight has been added).	The firm, fixed percentage is N/A. Installation services are not provided by Keystone Ridge Designs for our site furnishings
3. Is your written factory certification for the installation of playground equipment attached?	Yes (No)
4. If you are using a subcontractor for the installation of playground equipment list the Certified Installer's Company Name/s:	Name: N/A
5. Does your company provide repair service?	Yes (No) $_____/hour
6. Engineered Wood Fiber Mulch (to include ground preparation and Geotextile separator installation) Is manufacturer's specification data sheet attached?	Yes (No) $_____ per Cu. Ft $_____ per Sq. Ft

7. Surfacing Products (Poured-In-Place Rubber, Artificial Turf, FlexiPave, Concrete and Brick Pavers) Is price table attached Is manufacturer's specification data sheet attached? Have samples been submitted?	Yes Yes Yes	No No No
8. Have you submitted catalog(s), CD(s) or printed price sheet(s) to be considered as part of this bid? Failure to submit may disqualify your bid.	Yes	No
9. Minimum order?	Yes If so, $	No
10. List any Exclusions:		
11. Contact Information: Name: Kaitlyn Ringwelski Phone: 724-284-1213, ext. 227 Cell: — Email: KaitlynR@Keystoneridgedesigns.com		

Firm Name: Keystone Ridge Designs, Inc.

Authorized Representative's Name: Angela Maloney

Authorized Representative's Title: Director of Marketing

Address: 670 Mercer Rd

City: Butler State: PA Zip: 16001

Telephone No.: 800-284-8208 Fax No.: 724-284-1253 Email: sales@Keystoneridgedesigns.com

Federal I.D. #: 251775682

Type Organization: [ ] Individual [ ] Small Business [ ] Non-Profit [ ] LLC
[ ] Partnership [X] Corporation [ ] Joint Venture

Business is licensed (unless exempt by applicable law), permitted and certified to do business in the State of Florida:
[ ] Yes [X] No License # _____

Minority Business Status: [ ] Black [ ] Hispanic [ ] Woman [ ] Other None

Is your business certified as a minority business with any government agency? [ ] Yes [X] No. If yes, please list below:

Agency Name	Certification Number	Expiration Date

Sub-Contracting Submittals required: Forms MBD-10, MBD-20 must be submitted with the bid/proposal.

By signing this bid the Bidder complies with all of the requirements of the bid including but not limited to Communication Policy and City of Tampa Ethics Code contained in Section 4 of the GENERAL CONDITIONS.

Authorized Signature: Angela M Maloney Date: 4/13/2021

Tampa

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules
City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)
(FORM MBD-10)

Contract No.: 21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421
Company Name: Keystone Ridge Designs Inc. Address: 670 Mercer Rd Butler PA 16001
Federal ID: 251775682 Phone: 724-284-1213 Fax: 724-284-1253 Email: sales@keystoneridgedesigns.com

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.
[ ] **No Firms were contacted or solicited for this contract.**
[X] **No Firms were contacted because:** we are the sole manufacturer and do not work with subcontractors
[ ] **See attached list of additional Firms solicited and all supplemental information (List must comply to this form)**
Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909 General = 912, Heavy = 913, Trades = 914, Architects = 906 Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=WMBE O = Neither / Federal ID	Company Name Address Phone Fax Email	Type of Ownership (F=Female M=Male) BF BM = African Am HF HM = Hispanic AF AM = Asian Am NF NM = Native Am CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub–contracting opportunities on this contract.

Signed: Angela M Maloney Name/Title: Angela M Maloney Dir of Marketing Date: 4/13/2021

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive
Forms must be included with Bid / Proposal

MBD 10 rev./effective 02/2016

Tampa

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 3 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.: 21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421

Company Name: Keystone Ridge Designs, Inc. Address: 670 Mercer Rd Butler PA 16001

Federal ID: 251 775682 Phone: 724-284-1213 Fax: 724-284-1253 Email: sales@keystoneridgedesigns.com

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

[ ] **See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)**
Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

[ ] **No Subcontracting/consulting (of any kind) will be performed on this contract.**

[X] **No Firms are listed to be utilized because:** we are the sole manufacturer and will not use subcontractors

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913 Trades = 914, Architects = 906, Engineers & Surveyors = 925 Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise "O" for Other Non-Certified

S = SLBE W=WMBE O =Neither / Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am HF HM = Hispanic Am AF AM = Asian Am NF NM = Native Am CF CM = Caucasian	Trade Services, or Materials NIGP Code Listed above	$ Amount of Quote Letter of Intent (LOI) if available	Percent of Scope or Contract %

Total ALL Subcontract / Supplier Utilization $ N/A

Total SLBE Utilization $ N/A

Total WMBE Utilization $ N/A

Percent SLBE Utilization of Total Bid/Proposal Amt. N/A **%** **Percent WMBE Utilization of Total Bid/Proposal Amt.** N/A **%**

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract

Signed: [signature] Name/Title: Angela M Maloney Dir of Marketing Date: 4/13/2021

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

MBD 20 rev./effective 02/2016

City of Tampa – DMI Sub-(Contractors/Consultants/Suppliers) Payments [ ] Partial [X] Final

Contract No.: 21-C-00417 WO#.(if any)_____ Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421
Contractor Name: Keystone Ridge Designs Inc. Address 670 Mercer Rd, Butler PA 16001
Federal ID 251 715 682 Phone 724-284-1013 Fax 724-284-1253 Email Sales@keystoneridgedesigns.com
GC Pay Period _____ Payment Request/Invoice Number:_____ City Department: _____
Total Amount Requested for pay period:_____ Total Contract Amount(including change orders):_____

-Type of Ownership - (F=Female M=Male), BF BM = African Am., HF HM = Hispanic Am., AF AM = Asian Am., NF NM = Native Am., CF CM = Caucasian S = SLBE

Type Trade/Work Activity []Sub []Supplier Federal ID	Company Name Address Phone & Fax	Total Sub Contract Or PO Amount	Amount Paid To Date Amount Pending Previously Reported	Amount To Be Paid For This Period Sub Pay Period Ending Date
			$	$
			$	$
			$	$
			$	$
			$	$

Certification: I hereby certify that the above information is a true and accurate account of payments to sub – contractors/consultants on this contract.

Signed Angela M Maloney Name/Title Angela M Maloney Dir. of Marketing Date 4/13/2021
(Modifying This Form or Failure to Complete and Sign May Result in Non-Compliance)

DMI form 30 (rev. 03/12/10) Pg __ of __ [ ] See attached for additional information.

ATTACHMENT B

	A	B	C
1	ATTACHMENT B - PRODUCTS LIST		
2	PRODUCTS	TYPE	MANF. NAME
3	Benches ✓	PLAYGROUND & FITNESS EQUIPMENT	
4	Trash Receptacles ✓	650.12, 650.18	Landscape Structures
5	Bike Racks ✓	650.38, 650.54	Gametime
6	Bollards ✓	650.60, 650.72	Kompan
7	Picnic Tables ✓	650.60, 650.72	Berliner Seilfabrik
8	Bike Repair Station		
9	Play Equipment		
10	-Play Structure	PLAY SURFACING -	MANUFACTURER D
11	-Free Standing		GT Impax PIP
12	Safety Surfacing	650.5	Vitriturf PIP
13	-PIP		LS Pebble Flex
14	-Eng. Wood Fiber		Surface America PIP
15	-Play Turf		Fibar
16	Dog Waste Station		KorKat
17	Pavers		Forever Lawn
18	- brick		
19	- concrete		Innovative Sports Surfacing
20	Flexi Pave		
21	Shade Structure		
22	-fabric sails		
23	-hard roof	SITE FURN:	
24	Turf Support Mtls.		MANUFACTURER
25	Perma Trak		Du Mor
26		Comm Codes	Victor Stanley
27		650.06	Anova Furnishings, Inc.
28		650.1	Landscape Forms
29		650.24	Keystone Ridge Designs, Inc. — 5 % Discount
30		650.36	Kay Park
31		650.38	Belson Outdoors
32			Wabash Valley
33			The Park Catalog
34		120.27	Wausau Tile
35			Namco DoggyDo Station
36			iron Age Designs
37			Ironsmith, Inc.
38			Dura Art Stone
39			Creative Systems-Landscape Brands
40			Park Warehouse
41			mmcite7 LLC
42			Forms + Surfaces
43			
44		SHADE STRUCTURES & GAZEBO	
45			MANUFACTURERS

We are bidding on Keystone Ridge Designs products only as the direct manufacturer of these products

Stoartz Assoc

BIDDER'S AFFIDAVIT

Before me, the undersigned authority who is duly authorized by law to administer oaths and take acknowledgements, personally appeared

AFFIANT'S NAME

Who, after being duly cautioned and sworn, and being fully aware of the penalties of perjury, does hereby depose and declare, on his own behalf or as a representative on behalf of a partnership or corporation, or other entity that is the Bidder in the matter at hand, as follows:

1. That the Bidder, if a natural person, is of lawful age.

2. That if the Bidder is a partnership, or a corporation, or other legal person or entity recognized in the State of Florida, it has complied with all laws and ordinances governing the formation and continued existence of such entities, including but not limited to, if a Florida corporation, to the filing of its Articles of Incorporation with the Florida Secretary of State and if a corporation incorporated under the laws of a state other than Florida, that it is duly authorized to do business in the State of Florida; that it is currently an active corporation or entity fully authorized to do business; and that the undersigned is representative of the corporation or entity authorized to make this affirmation and declaration and who has the power to bind said corporation or entity.

3. That if the Bidder is operating under a fictitious name, Bidder has currently complied with and any and all laws and procedures governing the operation of businesses under fictitious names in the State of Florida;

4. That the Bidder has not submitted a rigged Bid, nor engaged in collusive bidding, or a collusive bidding arrangement, or fraudulent bidding, or entered into a conspiracy in connection with this bid with any other natural person, partnership, corporation or other entity making a bid for the same purpose. The Bidder has not entered into any understanding or agreement with any other person or entity where one or more such persons or entities agrees not to bid or fixing the prices to be bid.

5. In the event that the City determines that the Bidder has participated in any collusive, deceptive or fraudulent practices in derogation of the statements in this Affidavit the City, in addition to any other remedy it may exercise, will have the right to debar the Bidder. The contract let under such circumstances shall be deemed invalid.

6. That the Bidder is not in arrears to the City of Tampa upon debt or contract and is not in default, as surety or otherwise, of any obligation to the City, Hillsborough County or the State of Florida

7. That no officer or employee of the City, either individually or through any firm, corporation or business of which he/she is a stockholder or holds office, shall receive any substantial benefit or profit out of the contract or award to this Bidder; nor does the Bidder know of any City officer or employee having any financial interest in assisting the Bidder to obtain, or in any other way effecting, the award of the contract to this Bidder.

8. That, by submitting this bid, the Bidder certifies that he/she has fully read and understands the bid method and has full knowledge of the scope, nature, and quality of work to be performed or the services to be rendered.

9. That, by submitting this Bid, Affiant certifies compliance with Section 287.135, Florida Statutes and for contracts for goods or services of $1 million or more, that the Bidder is not on the Scrutinized Companies with Activities in the Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, and is not engaged in business operations in Cuba or Syria, and that for contracts for goods or services of any amount, that the Bidder is not on the Scrutinized Companies that Boycott Israel List, and is not engaged in a boycott of Israel. Affiant understands that pursuant to Section 287.135, Florida Statutes, the submission of a false certification may subject Bidder to civil penalties, attorney's fees, other costs and termination of any contract that is awarded.

The bid documents contain a General Conditions Section and may, in most cases, contain a Technical Specification Section. General Conditions contain general requirements and Technical Specifications detail the scope of the goods and/or services requested. The Technical Specifications shall always govern whenever there appears to be a conflict.

The Bidder shall comply with the applicable requirements of Federal and state laws, all Codes and Ordinances of the City of Tampa as amended from time to time and any applicable professional regulations.

FURTHER AFFIANT SAYETH NOT.

Bidder: Complete the applicable Acknowledgement for An Individual Acting In His/Her Own Right, A Partnership or A Corporation, according to your firm type.

FOR AN INDIVIDUAL ACTING IN HIS/HER OWN RIGHT

State of _____
County of _____

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization this _____ day of _____ 20____, by _____, who is personally known to me or who has produced identification and who did (did not) take an oath.

_____
Signature of Notary Public

_____
Signature of Affiant

Notary Public
State of: _____
My Commission
Expires: _____

_____
Printed, typed or stamped
Commissioned name of notary public

_____
Printed or typed name of Affiant

FOR AN ENTITY

State of FL
County of Collier

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization this 20th day of April 2021, by Dan Swartz, as President, of Swartz Associates, Inc a ☐ Partnership, ☐ Joint Venture, ☒ Corporation, ☐ Limited Liability Company (LLC) or ☐ Other _____, on behalf of such entity. Such individual is personally known to me or has produced identification.

Type of identification produced: _____

_____
Signature of Notary Public

_____
Signature of Affiant

Notary Public
State of: Florida
My Commission
Expires: 9/25/2022

Notary Public State of Florida
Helen W Richy
My Commission GG 253472
Expires 09/25/2022

_____
Printed, typed or stamped
Commissioned name of notary public

Dan Swartz
Printed or typed name of Affiant

BIDDER SUBMITTAL CHECKLIST
BID DOCUMENTS TO BE RETURNED

BID #: 31041421	
BID TITLE: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, AND INSTALLATION, REPAIRS AND REPLACEMENT	
THE FOLLOWING FORMS MUST BE INCLUDED IN BID PACKAGE PLEASE ACKNOWLEDGE BY ANSWERING "YES"	
	YES
Did you sign your bid? *	X
Did you sign and complete MBD Forms 10 and 20? *	X
Did you fully complete the price proposal /bid response page? *	X
Did you complete the Bidder's Affidavit and associated notarized form? *	X
If an addendum has been issued that changed the Bid Response Page(s), did you provide pricing on the pages marked "Addendum" *	N/A
Did you include catalogs, price sheets and or CD's as indicated per Technical Specification? *	X
Did you include copies of certificates and or licenses as indicated per Technical Specification? *	X
Did you include pricing for Engineered Fiber Wood Mulch per Technical Specification? *	N/A
Did you include Manufacture Specifications as per Technical Specification? *	X
Did you List pricing based on thickness and color options per Section 11 of the Technical Specifications?*	N/A
Is your company name clearly be indicated on the attached price sheet?*	X

*** Failure to submit these forms shall result in your bid being deemed as "non-responsive".**

Requested Voluntary Information Regarding
Bidder's Initial Employment Application Content

The Bidder's own initial application for employment has criminal history screening practices similar in nature to the practices contained in Chapter 12, Article VI – Criminal History Screening Practices, City of Tampa Code of Ordinances. *(Responses, whether "Yes" or "No", are for informational purposes only and will not be used as a basis of award or denial, nor as a basis for any protest)*: [_] Yes [_] No

Firm Name: Swartz Associates, Inc.

Authorized signature: _____ Date: 5/13/21

ATTACHMENT A - CONFLICT OF INTEREST DISCLOSURE FORM

For purposes of determining any possible conflict of interest, all bidders/proposers, must disclose if any elected or appointed officer of the City of Tampa, City of Tampa employee(s), or any immediate family member* or close personal relation** of an elected or appointed officer of the City of Tampa or City employee(s) is also an owner, corporate officer, agent, employee, stockholder, or has a controlling financial interest***, etc., of their business.

**Immediate family* means spouse, parents and children of the person involved.

***Close personal relationship* means dating, cohabitation, and/or having an intimate sexual relationship. Dating includes but is not limited to casual dating, serious dating, or casual sexual involvement where the parties have no intention of carrying on a long-term relationship, cohabitation, and any other conduct or behavior normally associated with romantic or sexual relationships. This definition applies regardless of the sexual orientation of the employees involved. Persons involved in a close personal relationship shall be referred to as a "close personal relation."

****Controlling financial interest* means ownership, directly or indirectly, to ten (10) percent or more of the outstanding capital stock in any corporation or a direct or indirect interest of ten (10) percent or more in a firm, partnership, or other business entity or such other interest or position in a business entity sufficient to allow him/her or her to control its operations.

Indicate either "yes" (a City employee, elected or appointed official is also associated with your business), or "no". If yes, give person(s) name(s) and position(s) with your business.

YES _____ NO X

NAME(S) / POSITION(S)

_____

_____

_____

_____

FIRM NAME: Swartz Associates, Inc.

BY (PRINTED NAME): Dan Swartz

BY (SIGNATURE): [signature]

TITLE: Pres.

DATE: 4/20/21

BID RESPONSE FOR
SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT

Please Print or Type

We the undersigned, as Bidders, hereby declare that we have carefully read this proposal or bid and the provisions, terms and conditions concerning the equipment, materials, supplies or services as called for, and with full knowledge and understanding of the requirements and conditions, do hereby agree to furnish and to deliver as indicated, FOB, City Facility Location, with all transportation charges prepaid, and for the prices quoted thereon as follows.

Discount does not include freight. Must call for pricing on freight.

I. **Site Furnishings and Playground Equipment**	**Catalog Name**	**Date**	**Discount**
a. Catalog	Kay Park	2021	6%
b. Catalog	MyTCoat	2021	10%
C. Catalog	SiteScapes	2021	4%
d. Catalog	National Recreation	2021	10%
e. Catalog			
f. Catalog		*	Plus Freight*

If additional space is needed, attach additional pages using headings as indicated above

2. Installation of Site Furnishings, Playground Equipment, Shelters, Shade Structures, Gazebos, and Trellises, Etc. To be based on a firm fixed percentage of the equipment cost (the total cost after discount has been taken, but before freight has been added).	The firm, fixed percentage is _____% N/A
3. Is your written factory certification for the installation of playground equipment attached?	N/A Yes No
4. If you are using a subcontractor for the installation of playground equipment list the Certified Installer's Company Name/s:	N/A Name: _____
5. Does your company provide repair service?	Yes (No) $_____/hour
6. Engineered Wood Fiber Mulch (to include ground preparation and Geotextile separator installation) Is manufacturer's specification data sheet attached?	N/A Yes No $_____ per Cu. Ft $_____ per Sq. Ft

7. Surfacing Products (Poured-In-Place Rubber, Artificial Turf, FlexiPave, Concrete and Brick Pavers) Is price table attached Is manufacturer's specification data sheet attached? Have samples been submitted?	N/A Yes No Yes No Yes No
8. Have you submitted catalog(s), CD(s) or printed price sheet(s) to be considered as part of this bid? Failure to submit may disqualify your bid.	(Yes) No Also on our website - www.ParkPlayUSA.com
9. Minimum order?	(Yes) No If so, $ 1,000.00
10. List any Exclusions: Key Park - Speedy Bleachers	
11. Contact Information: Name: Dan Swartz Phone: 813.949.2288 Cell: Email: dan@parkplayusa.com	

Firm Name: Swartz Associates, Inc.

Authorized Representative's Name: Dan Swartz

Authorized Representative's Title: President

Address: PO Box 112783

City: Naples State: FL Zip: 34108

Telephone No.: 813-949-2288 Fax No.: None Email: mail@parkplayusa.com

Federal I.D. #: 65-0169405

Type Organization: [ ] Individual [ ] Small Business [ ] Non-Profit [ ] LLC
[ ] Partnership [X] Corporation [ ] Joint Venture

Business is licensed (unless exempt by applicable law), permitted and certified to do business in the State of Florida:
[X] Yes [ ] No License # _____

Minority Business Status: [ ] Black [ ] Hispanic [ ] Woman [ ] Other

Is your business certified as a minority business with any government agency? [ ] Yes [X] No. If yes, please list below:

Agency Name	Certification Number	Expiration Date

Sub-Contracting Submittals required: Forms MBD-10, MBD-20 must be submitted with the bid/proposal.

By signing this bid the Bidder complies with all of the requirements of the bid including but not limited to Communication Policy and City of Tampa Ethics Code contained in Section 4 of the GENERAL CONDITIONS.

Authorized Signature: _____ Date: 5/13/21

Tampa

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules
City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)
(FORM MBD-10)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421
Company Name: Swartz Associates Inc Address: PO Box 112783, Naples, FL 34108
Federal ID:65-0169405 Phone:813-949-2288 Fax: None Email: mail@parkplayusa.com

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.

[X] No Firms were contacted or solicited for this contract.
[ ] No Firms were contacted because: _____
[ ] See attached list of additional Firms solicited and all supplemental information (List must comply to this form)
Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=WMBE O = Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub–contracting opportunities on this contract.

Signed: _____ Name/Title: Dan Swartz, Pres Date: 5/13/21

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive
Forms must be included with Bid / Proposal

MBD 10 rev./effective 02/2016

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 3 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421

Company Name: Swartz Associates, Inc. Address: PO Box 112783, Naples, FL 34108

Federal ID:65-0169405 Phone:813-919-2288 Fax: None Email: mail@parkplayusa.com

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

[ ] **See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)**
Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

[X] **No Subcontracting/consulting (of any kind) will be performed on this contract.**

[ ] **No Firms are listed to be utilized because:** _____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=WMBE O =Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %

Total ALL Subcontract / Supplier Utilization $_____

Total SLBE Utilization $ _____

Total WMBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. ____% Percent WMBE Utilization of Total Bid/Proposal Amt. ____%

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: _____ Name/Title: Dan Swartz, Pres. Date: 5/13/21

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive
Forms must be included with Bid / Proposal

MBD 20 rev /effective 02/2016

most Dependable

BIDDER'S AFFIDAVIT

Before me, the undersigned authority who is duly authorized by law to administer oaths and take acknowledgements, personally appeared

Sarah McGrory

AFFIANT'S NAME (PERSON'S NAME)

Who, after being duly cautioned and sworn, and being fully aware of the penalties of perjury, does hereby depose and declare, on his/her own behalf or as a representative on behalf of a partnership or corporation, or other entity that is the Bidder in the matter at hand, as follows:

1. That the Bidder, if a natural person, is of lawful age.

2. That if the Bidder is a partnership, or a corporation, or other legal person or entity recognized in the State of Florida, it has complied with all laws and ordinances governing the formation and continued existence of such entities, including but not limited to, if a Florida corporation, to the filing of its Articles of Incorporation with the Florida Secretary of State and if a corporation incorporated under the laws of a state other than Florida, that it is duly authorized to do business in the State of Florida; that it is currently an active corporation or entity fully authorized to do business; and that the undersigned is representative of the corporation or entity authorized to make this affirmation and declaration and who has the power to bind said corporation or entity.

3. That if the Bidder is operating under a fictitious name, Bidder has currently complied with and any and all laws and procedures governing the operation of businesses under fictitious names in the State of Florida;

4. That the Bidder has not submitted a rigged Bid, nor engaged in collusive bidding, or a collusive bidding arrangement, or fraudulent bidding, or entered into a conspiracy in connection with this bid with any other natural person, partnership, corporation or other entity making a bid for the same purpose. The Bidder has not entered into any understanding or agreement with any other person or entity where one or more such persons or entities agrees not to bid or fixing the prices to be bid.

5. In the event that the City determines that the Bidder has participated in any collusive, deceptive or fraudulent practices in derogation of the statements in this Affidavit the City, in addition to any other remedy it may exercise, will have the right to debar the Bidder. The contract let under such circumstances shall be deemed invalid.

6. That the Bidder is not in arrears to the City of Tampa upon debt or contract and is not in default, as surety or otherwise, of any obligation to the City, Hillsborough County or the State of Florida

7. That no officer or employee of the City, either individually or through any firm, corporation or business of which he/she is a stockholder or holds office, shall receive any substantial benefit or profit out of the contract or award to this Bidder; nor does the Bidder know of any City officer or employee having any financial interest in assisting the Bidder to obtain, or in any other way effecting, the award of the contract to this Bidder.

8. That, by submitting this bid, the Bidder certifies that he/she has fully read and understands the bid method and has full knowledge of the scope, nature, and quality of work to be performed or the services to be rendered.

9. That, by submitting this Bid, Affiant certifies compliance with Section 287.135, Florida Statutes and for contracts for goods or services of $1 million or more, that the Bidder is not on the Scrutinized Companies with Activities in the Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, and is not engaged in business operations in Cuba or Syria, and that for contracts for goods or services of any amount, that the Bidder is not on the Scrutinized Companies that Boycott Israel List, and is not engaged in a boycott of Israel. Affiant understands that pursuant to Section 287.135, Florida Statutes, the submission of a false certification may subject Bidder to civil penalties, attorney's fees, other costs and termination of any contract that is awarded.

The bid documents contain a General Conditions Section and may, in most cases, contain a Technical Specification Section. General Conditions contain general requirements and Technical Specifications detail the scope of the goods and/or services requested. The Technical Specifications shall always govern whenever there appears to be a conflict.

The Bidder shall comply with the applicable requirements of Federal and state laws, all Codes and Ordinances of the City of Tampa as amended from time to time and any applicable professional regulations.

FURTHER AFFIANT SAYETH NOT.

Bidder: Complete the applicable Acknowledgement for An Individual Acting In His/Her Own Right, A Partnership or A Corporation, according to your firm type.

FOR AN INDIVIDUAL ACTING IN HIS/HER OWN RIGHT

State of _____
County of _____

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization this _____ day of _____ 20____, by _____, who is personally known to me or who has produced identification and who did (did not) take an oath.

_____ Signature of Notary Public

_____ Signature of Affiant

Notary Public
State of: _____
My Commission
Expires: _____

_____ Printed, typed or stamped Commissioned name of notary public

_____ Printed or typed name of Affiant

FOR AN ENTITY

State of Tennessee
County of Shelby

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or ☐ online notarization this 15th day of April 2021, by Anita L. Beachum, as owner, of Most Dependable Tns a ☐ Partnership, ☐ Joint Venture, ☒ Corporation, ☐ Limited Liability Company (LLC) or ☐ Other _____, on behalf of such entity. Such individual is personally known to me or has produced identification.

Type of identification produced: _____

_____ Signature of Notary Public

_____ Signature of Affiant

Notary Public
State of: TN
My Commission
Expires: 6-4-2022

EDYE ODOM
STATE OF TENNESSEE NOTARY PUBLIC
COUNTY OF SHELBY
My Comm. Expires June 4, 2022

_____ Printed, typed or stamped Commissioned name of notary public

Anita L. Beachum
Printed or typed name of Affiant

BIDDER SUBMITTAL CHECKLIST
BID DOCUMENTS TO BE RETURNED

BID #: 31041421	
BID TITLE: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, AND INSTALLATION, REPAIRS AND REPLACEMENT	
THE FOLLOWING FORMS MUST BE INCLUDED IN BID PACKAGE PLEASE ACKNOWLEDGE BY ANSWERING "YES"	
	YES
Did you sign your bid? *	X
Did you sign and complete MBD Forms 10 and 20? *	X
Did you fully complete the price proposal /bid response page? *	X
Did you complete the Bidder's Affidavit and associated notarized form? *	X
If an addendum has been issued that changed the Bid Response Page(s), did you provide pricing on the pages marked "Addendum" *	X
Did you include catalogs, price sheets and or CD's as indicated per Technical Specification? *	X
Did you include copies of certificates and or licenses as indicated per Technical Specification? *	N/A ☐
Did you include pricing for Engineered Fiber Wood Mulch per Technical Specification? *	N/A ☐
Did you include Manufacture Specifications as per Technical Specification? *	To be Provided as needed
Did you List pricing based on thickness and color options per Section 11 of the Technical Specifications?*	☐ N/A
Is your company name clearly be indicated on the attached price sheet?*	X

*** Failure to submit these forms shall result in your bid being deemed as "non-responsive".**

Requested Voluntary Information Regarding
Bidder's Initial Employment Application Content

The Bidder's own initial application for employment has criminal history screening practices similar in nature to the practices contained in Chapter 12, Article VI – Criminal History Screening Practices, City of Tampa Code of Ordinances. *(Responses, whether "Yes" or "No", are for informational purposes only and will not be used as a basis of award or denial, nor as a basis for any protest)*: [X] Yes [_] No

Firm Name: Most Dependable Fountains INC

Authorized signature: _____ Date: 4/15/2021

ATTACHMENT A - CONFLICT OF INTEREST DISCLOSURE FORM

For purposes of determining any possible conflict of interest, all bidders/proposers, must disclose if any elected or appointed officer of the City of Tampa, City of Tampa employee(s), or any immediate family member* or close personal relation** of an elected or appointed officer of the City of Tampa or City employee(s) is also an owner, corporate officer, agent, employee, stockholder, or has a controlling financial interest***, etc., of their business.

**Immediate family* means spouse, parents and children of the person involved.

***Close personal relationship* means dating, cohabitation, and/or having an intimate sexual relationship. Dating includes but is not limited to casual dating, serious dating, or casual sexual involvement where the parties have no intention of carrying on a long-term relationship, cohabitation, and any other conduct or behavior normally associated with romantic or sexual relationships. This definition applies regardless of the sexual orientation of the employees involved. Persons involved in a close personal relationship shall be referred to as a "close personal relation."

****Controlling financial interest* means ownership, directly or indirectly, to ten (10) percent or more of the outstanding capital stock in any corporation or a direct or indirect interest of ten (10) percent or more in a firm, partnership, or other business entity or such other interest or position in a business entity sufficient to allow him/her or her to control its operations.

Indicate either "yes" (a City employee, elected or appointed official is also associated with your business), or "no". If yes, give person(s) name(s) and position(s) with your business.

YES ____ NO X no conflict of interest

NAME(S) / POSITION(S)

_____

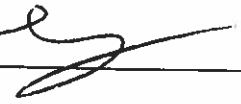
_____

_____

_____

FIRM NAME: Most Dependable Fountains Inc.

BY (PRINTED NAME): Sarah McGrary

BY (SIGNATURE): 

TITLE: Sales Director

DATE: 4/15/2021

BID RESPONSE FOR
SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT

Please Print or Type

We the undersigned, as Bidders, hereby declare that we have carefully read this proposal or bid and the provisions, terms and conditions concerning the equipment, materials, supplies or services as called for, and with full knowledge and understanding of the requirements and conditions, do hereby agree to furnish and to deliver as indicated, FOB, City Facility Location, with all transportation charges prepaid, and for the prices quoted thereon as follows.

I. **Site Furnishings and Playground Equipment**	**Catalog Name**	**Date**	**Discount**
a. Catalog	Most Dependable Fountains INC	2021	3%
b. Catalog			
C. Catalog			
d. Catalog			
e. Catalog			
f. Catalog			

If additional space is needed, attach additional pages using headings as indicated above

2. Installation of Site Furnishings, Playground Equipment, Shelters, Shade Structures, Gazebos, and Trellises, Etc. To be based on a firm fixed percentage of the equipment cost (the total cost after discount has been taken, but before freight has been added).	The firm, fixed percentage is N/A % To supply Product only
3. Is your written factory certification for the installation of playground equipment attached?	N/A Yes No
4. If you are using a subcontractor for the installation of playground equipment list the Certified Installer's Company Name/s:	Name: N/A
5. Does your company provide repair service?	Yes (No) $_____/hour
6. Engineered Wood Fiber Mulch (to include ground preparation and Geotextile separator installation) Is manufacturer's specification data sheet attached?	Yes No $_____ per Cu. Ft $_____ per Sq. Ft N/A

7. Surfacing Products (Poured-In-Place Rubber, Artificial Turf, FlexiPave, Concrete and Brick Pavers) Is price table attached Is manufacturer's specification data sheet attached? Have samples been submitted?	 Yes Yes Yes N/A	 No No No
8. Have you submitted catalog(s), CD(s) or printed price sheet(s) to be considered as part of this bid? Failure to submit may disqualify your bid.	(Yes)	No
9. Minimum order?	Yes If so, $_____	(No)
10. List any Exclusions:		
11. Contact Information: Name: Sarah McGrory Phone: 901-867-0039 Cell: 901-687-8167 Email: Sarah@MostDependable.com		

Firm Name: Most Dependable Fountains Inc.

Authorized Representative's Name: Sarah McGrory

Authorized Representative's Title: Sales Director

Address: 5705 commander Dr

City: Arlington State: TN Zip: 38002

Telephone No.: 901-867-0039 Fax No.: 901-867-4008 Email: Sarah@mostdependable.com

Federal I.D. #: 62-1360921

Type Organization: [ ] Individual [ ] Small Business [ ] Non-Profit [ ] LLC
[ ] Partnership [X] Corporation [ ] Joint Venture

Business is licensed (unless exempt by applicable law), permitted and certified to do business in the State of Florida:
[ ] Yes [X] No License #_____

Minority Business Status: [ ] Black [ ] Hispanic [ ] Woman [ ] Other

Is your business certified as a minority business with any government agency? [ ] Yes [X] No. If yes, please list below:

Agency Name	Certification Number	Expiration Date

Sub-Contracting Submittals required: Forms MBD-10, MBD-20 must be submitted with the bid/proposal.

By signing this bid the Bidder complies with all of the requirements of the bid including but not limited to Communication Policy and City of Tampa Ethics Code contained in Section 4 of the GENERAL CONDITIONS.

Authorized Signature: _____ Date: 4/15/2021

City of Tampa

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules
City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)
(FORM MBD-10)

Contract No.: 21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421
Company Name: Most Dependable Fountains Address: 5705 commander Dr. Arlington TN 38002
Federal ID: 62-1360921 Phone: 901-867-0039 Fax: 901-867-4008 Email: sarah@mostDependable.co

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.
[X] No Firms were contacted or solicited for this contract.
[X] No Firms were contacted because: We sell Direct - Product only no installation
[ ] See attached list of additional Firms solicited and all supplemental information (List must comply to this form)
Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=WMBE O = Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub–contracting opportunities on this contract.

Signed: _____ Name/Title: Sarah McGrory / Sales Director Date: 4/15/2021

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive
Forms must be included with Bid / Proposal

MBD 10 rev./effective 02/2016

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 3 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421

Company Name: Most Dependable Fountains Address: 5705 commander Dr. Arlington, TN 38002

Federal ID: 62-1360921 Phone: 901-867-0038 Fax: 901-867-4008 Email: sarah@mostdependable.co

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

[ ] See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)
Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

[X] No Subcontracting/consulting (of any kind) will be performed on this contract.

[ ] No Firms are listed to be utilized because: _____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=WMBE O =Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %

Total ALL Subcontract / Supplier Utilization $ _____

Total SLBE Utilization $ _____

Total WMBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. ____% **Percent WMBE Utilization of Total Bid/Proposal Amt.** ____%

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: _____ Name/Title: Sarah McCrory / Sales Direct Date: 4/15/2021

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

MBD 20 rev./effective 02/2016

City of Tampa – DMI Sub-(Contractors/Consultants/Suppliers) Payments [ ] Partial [ ] Final

Contract No.: 21-C-00417 WO#,(if any)____ Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421
Contractor Name: Most Dependable Fountains Address 5705 commander Dr. Arlington TN 38002
Federal ID 62-1360921 Phone 901-867-0378 Fax 901-867-4028 Email Sarah@mostdependable.com
GC Pay Period _____ Payment Request/Invoice Number:_____ City Department: _____
Total Amount Requested for pay period:_____ Total Contract Amount(including change orders):_____

-Type of Ownership - (F=Female M=Male), BF BM = African Am., HF HM = Hispanic Am., AF AM = Asian Am., NF NM = Native Am., CF CM = Caucasian S = SLBE

Type Trade/Work Activity []Sub []Supplier Federal ID	Company Name Address Phone & Fax	Total Sub Contract Or PO Amount	Amount Paid To Date / Amount Pending Previously Reported	Amount To Be Paid For This Period / Sub Pay Period Ending Date
	NO subcontractors N/A		$	$
			$	$
			$	$
			$	$
			$	$
			$	$

Certification: I hereby certify that the above information is a true and accurate account of payments to sub – contractors/consultants on this contract.

Signed _____ Name/Title Sarah McGrory / Sales Director Date: 04/15/2021
(Modifying This Form or Failure to Complete and Sign May Result in Non-Compliance)

DMI form 30 (rev. 03/12/10) Pg __ of __ [ ] See attached for additional information.

ATTACHMENT B

	A	B	C
1		**ATTACHMENT B - PRODUCTS LIST**	
2	**PRODUCTS**	**TYPE**	**MANF. NAME**
3	Benches	**PLAYGROUND & FITNESS EQUIPMENT**	
4	Trash Receptacles	650.12, 650.18	Landscape Structures
5	Bike Racks	650.38, 650.54	Gametime
6	Bollards	650.60, 650.72	Kompan
7	Picnic Tables	650.60, 650.72	Berliner Seilfabrik
8	Bike Repair Station		
9	Play Equipment		
10	-Play Structure	**PLAY SURFACING -**	**MANUFACTURER**
11	-Free Standing		GT Impax PIP
12	Safety Surfacing	650.5	Vitriturf PIP
13	-PIP		LS Pebble Flex
14	-Eng. Wood Fiber		Surface America PIP
15	-Play Turf		Fibar
16	Dog Waste Station		KorKat
17	Pavers		Forever Lawn
18	- brick		
19	- concrete		Innovative Sports Surfacing
20	Flexi Pave		
21	Shade Structure		
22	-fabric sails		
23	-hard roof	**SITE FURN:**	
24	Turf Support Mtls.		**MANUFACTURER**
25	Perma Trak		Du Mor
26		Comm Codes	Victor Stanley
27		650.06	Anova Furnishings, Inc.
28		650.1	Landscape Forms
29		650.24	Keystone Ridge Designs, Inc.
30		650.36	Kay Park
31		650.38	Belson Outdoors
32			Wabash Valley
33			The Park Catalog
34		120.27	Wausau Tile
35			Namco DoggyDo Station
36			iron Age Designs
37			Ironsmith, Inc.
38			Dura Art Stone
39			Creative Systems-Landscape Brands
40			Park Warehouse
41			mmcite7 LLC
42			Forms + Surfaces
43			
44		**SHADE STRUCTURES & GAZEBO**	
45			**MANUFACTURERS**

ATTACHMENT B

	D	E
46		
47		
48		
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51		
52		
53	**ETAILS**	
54		
55	Metal edging	
56	Turf support	
57	Alt. tree grate / paving	
58	Boardwalk system	
59	Decking	
60	Turf support	
61	Block walls	
62	Block walls	
63	Brick Pavers	
64		
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ATTACHMENT B

	A	B	C
46			Poligon
47			Shade Systems
48			Appollo Sunguard
49			USA Shade
50			Classic Recreation Systems
51			Tensile Shade Products
52			
53		**MISCELLANEOUS PRODUCTS / MATERIALS**	
54			**MANUFACTURERS**
55			PermaLoc
56			Grass Pave
57			FlexiPave
58			PermaTrak
59			Trex Company, Inc.
60			Geo Block
61			Oldcastle
62			Keystone
63			Pine Hall Brick
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ATTACHMENT B

	D	E
1		
2	**DETAILS**	**DISCOUNT %**
3		
4	Play structures & Free Stdg. Pieces	
5	Play structures & Free Stdg. Pieces	
6	Play structures & Free Stdg. Pieces	
7	Play structures & Free Stdg. Pieces	
8		
9		
10	**ETAILS**	
11	Rubber & Engineered wood fiber	
12	Rubber Poured In Place (PIP)	
13	Rubber PIP	
14	Rubber PIP	
15	Eng. Wood Fiber / Rubber PIP	
16	Rubber PIP, Eng. Wood Fiber, Bonded Rubber, Rubber Mulch, Artificial	
17	Artificial Playground Turf	
18		
19	Rubber PIP, Artificial Turf, Court Surface Repair	
20		
21		
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44		
45	**DETAILS**	

Miller Recreation

BIDDER'S AFFIDAVIT

Before me, the undersigned authority who is duly authorized by law to administer oaths and take acknowledgements, personally appeared

Susan Miller

AFFIANT'S NAME (PERSON'S NAME)

Who, after being duly cautioned and sworn, and being fully aware of the penalties of perjury, does hereby depose and declare, on his/her own behalf or as a representative on behalf of a partnership or corporation, or other entity that is the Bidder in the matter at hand, as follows:

1. That the Bidder, if a natural person, is of lawful age.

2. That if the Bidder is a partnership, or a corporation, or other legal person or entity recognized in the State of Florida, it has complied with all laws and ordinances governing the formation and continued existence of such entities, including but not limited to, if a Florida corporation, to the filing of its Articles of Incorporation with the Florida Secretary of State and if a corporation incorporated under the laws of a state other than Florida, that it is duly authorized to do business in the State of Florida; that it is currently an active corporation or entity fully authorized to do business; and that the undersigned is representative of the corporation or entity authorized to make this affirmation and declaration and who has the power to bind said corporation or entity.

3. That if the Bidder is operating under a fictitious name, Bidder has currently complied with and any and all laws and procedures governing the operation of businesses under fictitious names in the State of Florida;

4. That the Bidder has not submitted a rigged Bid, nor engaged in collusive bidding, or a collusive bidding arrangement, or fraudulent bidding, or entered into a conspiracy in connection with this bid with any other natural person, partnership, corporation or other entity making a bid for the same purpose. The Bidder has not entered into any understanding or agreement with any other person or entity where one or more such persons or entities agrees not to bid or fixing the prices to be bid.

5. In the event that the City determines that the Bidder has participated in any collusive, deceptive or fraudulent practices in derogation of the statements in this Affidavit the City, in addition to any other remedy it may exercise, will have the right to debar the Bidder. The contract let under such circumstances shall be deemed invalid.

6. That the Bidder is not in arrears to the City of Tampa upon debt or contract and is not in default, as surety or otherwise, of any obligation to the City, Hillsborough County or the State of Florida

7. That no officer or employee of the City, either individually or through any firm, corporation or business of which he/she is a stockholder or holds office, shall receive any substantial benefit or profit out of the contract or award to this Bidder; nor does the Bidder know of any City officer or employee having any financial interest in assisting the Bidder to obtain, or in any other way effecting, the award of the contract to this Bidder.

8. That, by submitting this bid, the Bidder certifies that he/she has fully read and understands the bid method and has full knowledge of the scope, nature, and quality of work to be performed or the services to be rendered.

9. That, by submitting this Bid, Affiant certifies compliance with Section 287.135, Florida Statutes and for contracts for goods or services of $1 million or more, that the Bidder is not on the Scrutinized Companies with Activities in the Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, and is not engaged in business operations in Cuba or Syria, and that for contracts for goods or services of any amount, that the Bidder is not on the Scrutinized Companies that Boycott Israel List, and is not engaged in a boycott of Israel. Affiant understands that pursuant to Section 287.135, Florida Statutes, the submission of a false certification may subject Bidder to civil penalties, attorney's fees, other costs and termination of any contract that is awarded.

The bid documents contain a General Conditions Section and may, in most cases, contain a Technical Specification Section. General Conditions contain general requirements and Technical Specifications detail the scope of the goods and/or services requested. The Technical Specifications shall always govern whenever there appears to be a conflict.

The Bidder shall comply with the applicable requirements of Federal and state laws, all Codes and Ordinances of the City of Tampa as amended from time to time and any applicable professional regulations.

FURTHER AFFIANT SAYETH NOT.

Bidder: Complete the applicable Acknowledgement for An Individual Acting In His/Her Own Right, A Partnership or A Corporation, according to your firm type.

FOR AN INDIVIDUAL ACTING IN HIS/ HER OWN RIGHT

State of _____
County of _____

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization this _____ day of _____ 20____, by _____, who is personally known to me or who has produced identification and who did (did not) take an oath.

_____ Signature of Notary Public

_____ Signature of Affiant

Notary Public
State of: _____
My Commission
Expires: _____

_____ Printed, typed or stamped Commissioned name of notary public

_____ Printed or typed name of Affiant

FOR AN ENTITY

State of Florida
County of Monroe

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or ☐ online notarization this 13th day of April 2021 by Susan Miller, as Vice President, of Miller Recreation Equipment & Design a ☐ Partnership, ☐ Joint Venture, ☑ Corporation, ☐ Limited Liability Company (LLC) or ☐ Other _____, on behalf of such entity. Such individual is personally known to me or has produced identification.

Type of identification produced: FL Drivers License

Signature of Notary Public

Signature of Affiant

Notary Public
State of: Florida
My Commission
Expires: Sept. 11, 2022

MELODIE STARR
Notary Public - State of Florida
Commission # GG 257497
My Comm. Expires Sep 11, 2022
Bonded through National Notary Assn.

_____ Printed, typed or stamped Commissioned name of notary public

Susan MILLER
Printed or typed name of Affiant

BIDDER SUBMITTAL CHECKLIST
BID DOCUMENTS TO BE RETURNED

BID #: 31041421	
BID TITLE: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, AND INSTALLATION, REPAIRS AND REPLACEMENT	
THE FOLLOWING FORMS MUST BE INCLUDED IN BID PACKAGE PLEASE ACKNOWLEDGE BY ANSWERING "YES"	
	YES
Did you sign your bid? *	X
Did you sign and complete MBD Forms 10 and 20? *	X
Did you fully complete the price proposal /bid response page? *	X
Did you complete the Bidder's Affidavit and associated notarized form? *	X
If an addendum has been issued that changed the Bid Response Page(s), did you provide pricing on the pages marked "Addendum" *	N/A
Did you include catalogs, price sheets and or CD's as indicated per Technical Specification? *	X
Did you include copies of certificates and or licenses as indicated per Technical Specification? *	X
Did you include pricing for Engineered Fiber Wood Mulch per Technical Specification? *	X
Did you include Manufacture Specifications as per Technical Specification? *	X
Did you List pricing based on thickness and color options per Section 11 of the Technical Specifications?*	no pricelist available
Is your company name clearly be indicated on the attached price sheet?*	X

*** Failure to submit these forms shall result in your bid being deemed as "non-responsive".**

Requested Voluntary Information Regarding
Bidder's Initial Employment Application Content

The Bidder's own initial application for employment has criminal history screening practices similar in nature to the practices contained in Chapter 12, Article VI – Criminal History Screening Practices, City of Tampa Code of Ordinances. *(Responses, whether "Yes" or "No", are for informational purposes only and will not be used as a basis of award or denial, nor as a basis for any protest)*: [_] Yes [x] No

Firm Name: Miller Recreation Equipment & Design, Inc.

Authorized signature: Susan M. Miller Date: 4-19-21

ATTACHMENT A - CONFLICT OF INTEREST DISCLOSURE FORM

For purposes of determining any possible conflict of interest, all bidders/proposers, must disclose if any elected or appointed officer of the City of Tampa, City of Tampa employee(s), or any immediate family member* or close personal relation** of an elected or appointed officer of the City of Tampa or City employee(s) is also an owner, corporate officer, agent, employee, stockholder, or has a controlling financial interest***, etc., of their business.

**Immediate family* means spouse, parents and children of the person involved.

***Close personal relationship* means dating, cohabitation, and/or having an intimate sexual relationship. Dating includes but is not limited to casual dating, serious dating, or casual sexual involvement where the parties have no intention of carrying on a long-term relationship, cohabitation, and any other conduct or behavior normally associated with romantic or sexual relationships. This definition applies regardless of the sexual orientation of the employees involved. Persons involved in a close personal relationship shall be referred to as a "close personal relation."

****Controlling financial interest* means ownership, directly or indirectly, to ten (10) percent or more of the outstanding capital stock in any corporation or a direct or indirect interest of ten (10) percent or more in a firm, partnership, or other business entity or such other interest or position in a business entity sufficient to allow him/her or her to control its operations.

Indicate either "yes" (a City employee, elected or appointed official is also associated with your business), or "no". If yes, give person(s) name(s) and position(s) with your business.

YES _____ NO _X_

NAME(S) / POSITION(S)

_____

_____

_____

_____

FIRM NAME: Miller Recreation Equipment & Design, Inc.

BY (PRINTED NAME): Susan Miller

BY (SIGNATURE): Susan Miller

TITLE: Vice President

DATE: 4-19-21

BID RESPONSE FOR
SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT

Please Print or Type Miller Recreation Equipment & Design, Inc.

We the undersigned, as Bidders, hereby declare that we have carefully read this proposal or bid and the provisions, terms and conditions concerning the equipment, materials, supplies or services as called for, and with full knowledge and understanding of the requirements and conditions, do hereby agree to furnish and to deliver as indicated, FOB, City Facility Location, with all transportation charges prepaid, and for the prices quoted thereon as follows.

I. **Site Furnishings and Playground Equipment**	**Catalog Name**	**Date**	**Discount**
a. Catalog	See attached spreadsheet		
b. Catalog			
C. Catalog			
d. Catalog			
e. Catalog			
f. Catalog			

If additional space is needed, attach additional pages using headings as indicated above

2. Installation of Site Furnishings, Playground Equipment, Shelters, Shade Structures, Gazebos, and Trellises, Etc. To be based on a firm fixed percentage of the equipment cost (the total cost after discount has been taken, but before freight has been added).	The firm, fixed percentage is 25 % for playground equipment. Does not include shelters, shade structures, gazebos, PIP, etc.
3. Is your written factory certification for the installation of playground equipment attached?	Yes No
4. If you are using a subcontractor for the installation of playground equipment list the Certified Installer's Company Name/s:	Name: JD & JK of Florida, Ryan's Maintenance, Jkids Playsets, Principle Recreation
5. Does your company provide repair service?	Yes No $ 175 /hour
6. Engineered Wood Fiber Mulch (to include ground preparation and Geotextile separator installation) Is manufacturer's specification data sheet attached?	Fibar price is for minimum 100cy truckload. Yes No $ 28 per cy Fibar per Cu. Ft $ 299 per 2070 sq. ft. roll per Sq. Ft

Susan Miller

Site Furnishings and Playground Equipment	Catalog Name	Date	Discount
www.nofault.com	No Fault (poured in place surfacing		5%
www.wabashvalley.com	Wabash Valley		5%
www.fibar.com	Fibar		Pricing shown on page 24
www.usa-shade.com	USA Shade		5%
www.douglas-sports.com	Douglas Industries		5%
www.bisoninc.com	Bison Sports		5%
www.kaypark.com	Kay Park		5%
www.recycledesign.com	Recycle Design		5%
www.murdock-supersecur.com	Murdock Water Fountains		5%
www.actionplaysystems.com	Action Play Systems		5%
www.coverworx.com	Coverworx Shelters		5%
www.rcpshelters.com	RCP Shelters		5%
www.miracle-recreation.com	Miracle Recreation Equipment Co. Quantities:		See below:
VOLUME -	0-$4,999		8%
	$5,000-$9,999		12%
	$10,000-$14,999		15%
	$15,000-$17,999		18%
	$18,000-$24,999		18%
	$25,000-above		20%
	Does not include sales flyer items		

7. Surfacing Products (Poured-In-Place Rubber, Artificial Turf, FlexiPave, Concrete and Brick Pavers) Is price table attached Is manufacturer's specification data sheet attached? Have samples been submitted?	Yes Yes Yes	No No No
8. Have you submitted catalog(s), CD(s) or printed price sheet(s) to be considered as part of this bid? Failure to submit may disqualify your bid.	Yes	No
9. Minimum order?	Yes If so, $_____	No

10. List any Exclusions:

We have provided links to our manufacturer's websites in lieu of sending catalogs, due to time restraints. We will be happy to provide catalogs at a later date Installation can be provided for all of our products. Installation costs may vary for larger projects, such as shelters, shade structures, and poured in place surfacing

11. Contact Information:

Name: Susan Miller Phone: 941+792-4580

Cell: 941+232-1230 Email: mrecfla@gmail.com

Firm Name: Miller Recreation Equipment & Design

Authorized Representative's Name: Susan Miller

Authorized Representative's Title: VIce President

Address: 91760 Overseas Hwy, Suite 201

City: Tavernier State: Florida Zip: 33070

Telephone No.: 941+792-4580 Fax No.: N/A Email: mrecfla@gmail.com

Federal I.D. #: 65-0767594

Type Organization: [ ] Individual [ ] Small Business [ ] Non-Profit [ ] LLC
[ ] Partnership [X] Corporation [ ] Joint Venture

Business is licensed (unless exempt by applicable law), permitted and certified to do business in the State of Florida:
[ ] Yes [ ] No License # N/A

Minority Business Status: [ ] Black [ ] Hispanic [ ] Woman [ ] Other

Is your business certified as a minority business with any government agency? [ ] Yes [x] No. If yes, please list below:

Agency Name	Certification Number	Expiration Date

Sub-Contracting Submittals required: Forms MBD-10, MBD-20 must be submitted with the bid/proposal.

By signing this bid the Bidder complies with all of the requirements of the bid including but not limited to Communication Policy and City of Tampa Ethics Code contained in Section 4 of the GENERAL CONDITIONS.

Authorized Signature: Susan Miller Date: 4-19-2021

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules
City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)
(FORM MBD-10)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421

Company Name: Miller Recreation Equipment & Design, Inc. Address: 91760 Overseas Hwy, Suite 201, Tavernier, FL 33070

Federal ID: 65-0767594 Phone: 941+792-4580 Fax: N/A Email: mrecfla@gmail com

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.

[x] No Firms were contacted or solicited for this contract.

[x] No Firms were contacted because: Our installers have not been selected.

[ ] See attached list of additional Firms solicited and all supplemental information (List must comply to this form)

Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=WMBE O = Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub–contracting opportunities on this contract.

Signed: Susan Miller Name/Title: Susan Miller, Vice President Date: 4-19-2021

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

MBD 10 rev./effective 02/2016

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 3 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421

Company Name:Miller Recreation Address: 91760 Overseas Hwy, St 201, Tavernier, FL 33070

Federal ID:65-0767594 Phone:941+792-4580Fax: n/a Email: mrecfla@gmail.com

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

[ ] See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)
Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

[ ] No Subcontracting/consulting (of any kind) will be performed on this contract.

[ ] No Firms are listed to be utilized because:_____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=WMBE O =Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %

Total ALL Subcontract / Supplier Utilization $_____

Total SLBE Utilization $ _____

Total WMBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. ____% Percent WMBE Utilization of Total Bid/Proposal Amt. ____%

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: Susan Miller Name/Title: Susan Miller, Vice President Date: 4-19-2021

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive
Forms must be included with Bid / Proposal

MBD 20 rev./effective 02/2016

MILLER RECREATION EQUIPMENT & DESIGN, INC

Qualifications and Experiences

Miller Recreation is a family owned business and has been in existence since 1997. Joe Miller is the President of the company and Susan, his wife, is the Vice-President, Secretary, and Treasurer. Prior to starting our own business, Joe worked as a sales representative for Noland Associates on the West Coast from January of 1991- to 1997 selling Miracle playground equipment. The business grew under Joe's leadership and he received several company awards for his success as a sales representative, and his attention to customer service. In addition, Miracle Recreation Equipment Company, in business for more than 90 years is the largest manufacturer of playground equipment in the world.

It is our personal experience that sets us apart from most companies. Joe and Susan Miller spent 16 years in the public parks and recreation sector prior to owning their business. Joe has served as the Director of Parks and Recreation, Administrative Manager of a department, District Superintendent and a center director in those 16 years. He has developed and maintained operating and capital budgets. He has built and maintained parks, playgrounds, pools, athletic facilities, golf courses and community centers during his tenure in the public parks and recreation profession. Joe has a B.S. Degree in Parks and Recreation from Fairmont State University in West Virginia. As director, the department received several national awards from the National Association of Counties.

Susan Miller has B.S degree in Parks and Recreation from Fairmont State University in West Virginia. Susan served as the Director of Morgan County Parks and Recreation Department after graduating from college in West Virginia. Her tenure includes being the Civic Center Director for the City of Norfolk, District Superintendent for the City of Chesapeake, Virginia, Director Arlington Park for the City of Sarasota and Manatee County Girls Club Branch Director before leaving to assist with our business.

Miller Recreation represents a variety of outdoor equipment suppliers in 26 counties in Florida. We have designed and built hundreds of Miracle playgrounds in our territory. Most of these projects included playground equipment, installation, and fall material (to include EWF and Poured in Place Surfacing) for a turnkey job for our customers. In addition, we have designed and built many outdoor picnic pavilions, basketball courts, poured in place surfacing and shade covers. If there is an outdoor item that a customer wants, Miller Recreation represents it.

We use a licensed contractor to install our shelters and shade canopies.

Miller Recreation has two offices in Florida, covering the West and Central Florida. Also, we contract with (5) playground installation companies that are Miracle Certified Installers and are Certified Playground Safety Inspectors.

We are responsible for marketing, planning, designing and installation of many of the products and we are often called upon to act as project superintendent. We also contract with sub-contractors on most of our projects.

Our customers are greatly diversified, such as governmental agencies, day care centers, churches, developers, landscape architects, homeowners associations, resorts and commercial recreation businesses such as Busch Gardens and Disney.

We are members of the Florida Recreation and Parks Association and the Manatee Chamber of Commerce. Our commitment is to provide the best quality products and service to our customers.

Over the last several years, we provided the equipment and surfacing for (16) new elementary schools for OCPS. All of these schools received PIP surfacing on the Tot Playgrounds.
In addition, we just completed a 5000 sf of rubber repair for the City of Haines City.

Miller Recreation is a registered business with the State of Florida. Our number is P97000049934.

Certified Installer

Be it known that

Rich Falkowski

Principal Recreation Inc.

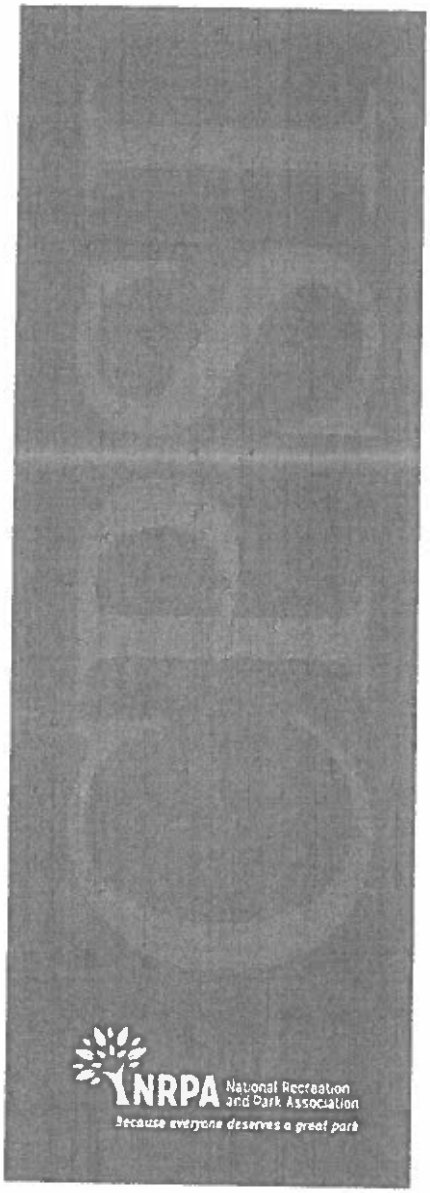
has completed the Course of Study
required by candidates for the achievement of

Certified Installer for Miracle Recreation Equipment Company

and is qualified to receive all honors and privileges appertaining hereto.
Completed at Miracle Recreation Equipment Company
Monett, Missouri,
this Seventh day of April, Two Thousand Sixteen.

Miracle

Mike Sutton, Vice President Outdoor Sales



National Recreation and Park Association

Let it be known that

JASON FURRY

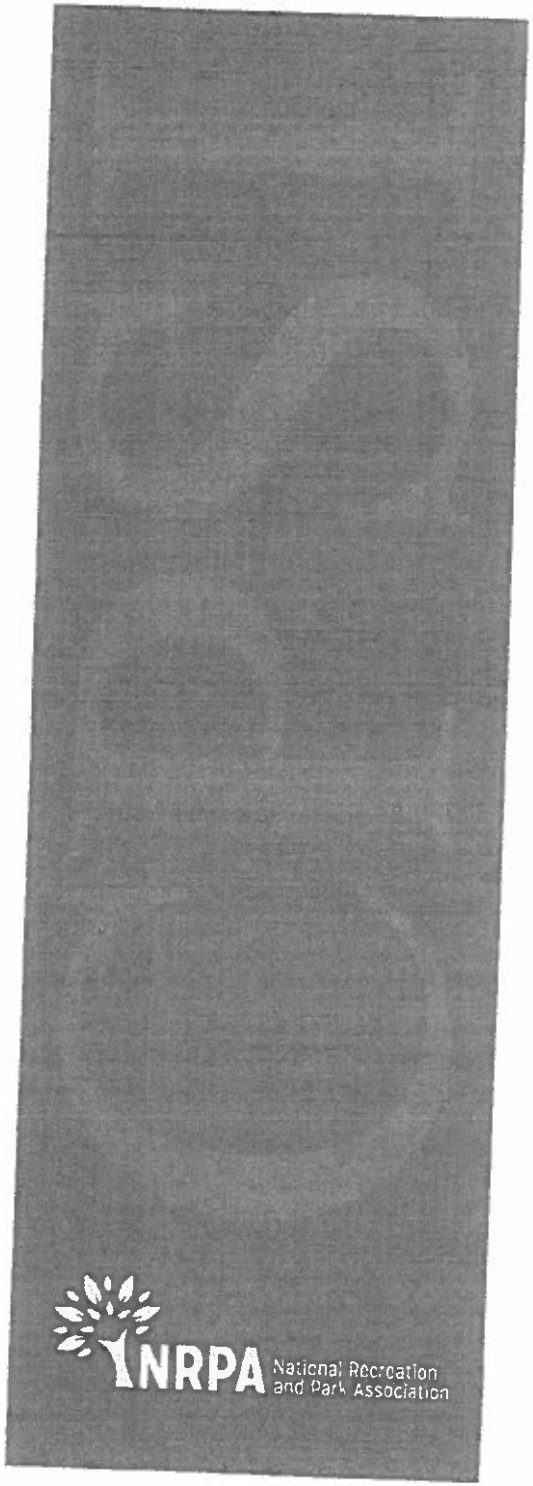
has met the requirements of the standards set forth by the
National Certification Board
and is hereby granted certification as a

Certified Playground Safety Inspector

September 18, 2019
DATE CERTIFIED

46808-1022
CERTIFICATION NUMBER

October 01, 2022
EXPIRATION DATE



NRPA National Recreation and Park Association

National Recreation and Park Association

Let it be known that

ROBERT STLUKA

has met the requirements of the standards set forth by the
National Certification Board
and is hereby granted certification as a

Certified Playground Safety Inspector

CPSI Certified Playground Safety Inspector

Tiffany L. Wilkins
CHAIRPERSON

Barbara Tulipane
NRPA PRESIDENT AND CEO

March 07, 2019
DATE CERTIFIED

44792-0422
CERTIFICATION NUMBER

April 01, 2022
EXPIRATION DATE

Certified Installer

Be it known that

William "Billy" Ryan

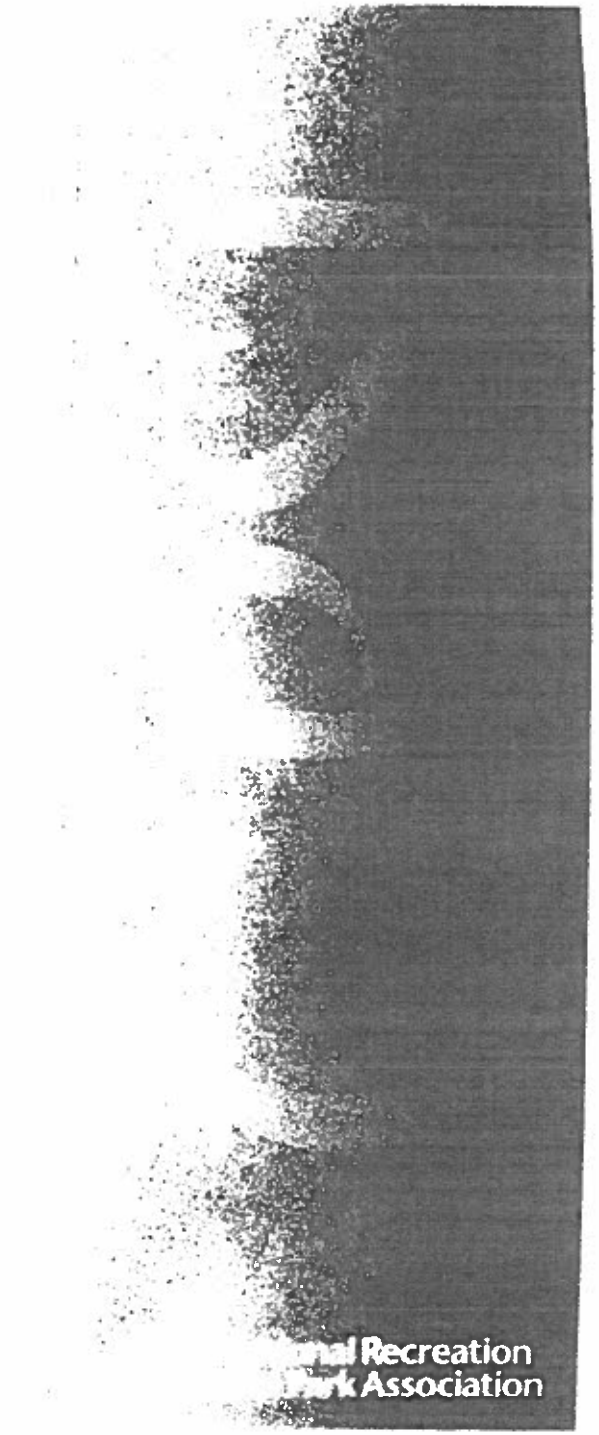
has completed the Course of Study
required by candidates for the achievement of

Certified Installer for Miracle Recreation Equipment Company

and is qualified to receive all honors and privileges appertaining hereto.
Completed at Miracle Recreation Equipment Company
Monett, Missouri,
this Twenty-First day of August. Two Thousand Fifteen.

Miracle

Mike Sutton, Vice President Outdoor Sales



National Recreation and Park Association

Let it be known that

WILLIAM RYAN

has met the requirements of the standards set forth by the

National Certification Board

and is hereby granted certification as a

Certified Playground Safety Inspector

CPSI Certified Playground Safety Inspector

Candice Rawlins

NATIONAL CERTIFICATION BOARD CHAIRPERSON

Barbara Tulipane

NRPA PRESIDENT AND CEO

11/30/2012

DATE CERTIFIED

21321-1215

CERTIFICATION NUMBER

12/1/2015

VALIDATION DATE

MATERIAL SAFETY DATA SHEET

I. PRODUCT DESCRIPTION:

Product Name	Fibar Engineered Wood Fiber
Composition	Natural Wood

II. HAZARDOUS INGREDIENTS:

There are no materials of a hazardous nature in the composition of this product.

III. PHYSICAL PROPERTIES:

Physical Form	Dry solid particles in a dense bulky form
Color	Varies from shades of gray to tan
Bulk Density / Weight	Nominally 475 pounds per cubic yard
Moisture Content	Maximum 50%, Minimum 4%
Particle Size	Nominally 1-1/2 inches long dimension with some particles being less than .010 inches
Odor	A slight wood odor can be detected by most people

IV. FIRE AND EXPLOSION DATA:

Flash Point	Engineered Wood Fiber contains no flammable liquids and emits no flammable vapors.
Auto-ignition Temperature	Greater than 400 degrees Fahrenheit
Fire Potential	As with most combustible materials, there is the potential for accidental fires. When the product is used as a ground cover it is very unlikely that it will be ignited accidentally. Even where ignition occurs, the fire will not spread without the support of a strong wind or other aids. Often the ground moisture present will be sufficient to suppress the burning. There is no documented evidence of accidental fires with this type of product.
Extinguishing Media	Water
Fire Fighting Procedure	Any of the standard procedures for extinguishing fires with water is effective. The methods that apply copious amounts of water in a dense mist are especially effective. There are no special concerns for the fire fighter; normal precautions for a non-hazardous material fire are recommended.

V. HUMAN HEALTH DATA:

Ingestion	Inadvertent ingestion of Engineered Wood Fiber is not harmful, but is unpleasant.
Inhalation	During application, workers should be provided with dust masks. After the product is applied, there is no risk of inhalation.
Medical Conditions	Persons with known respiratory conditions or allergies to wood dust or cellulose fibers should not work in areas where Engineered Wood Fiber is being unloaded or installed.

VI. EMERGENCY AND FIRST AID PROCEDURES:

First Aid for Eyes	Flush eyes with sterile water to remove dust particles. If this fails, get the injured person to a physician.

VII. EMPLOYEE PROTECTION RECOMMENDATIONS:

Eye Protection	Workers applying or spreading the product should wear safety glasses with side shields and masks.
Ventilation	If the product is stored indoors, ventilation should be provided that is sufficient to keep the dust at a comfortable level for the workers. Otherwise ventilation is not necessary.

VIII. PRODUCT STORAGE RECOMMENDATIONS AND PRECAUTIONS:

Storage	The product may be stored outdoors if the storage area floor is firm and well drained. A pile of Engineered Wood Fiber sheds rain well, however, the outer layer of the pile will become wet to a depth of one or two inches but will dry quickly after the rain has stopped. It is not necessary to cover Engineered Wood Fiber.
Product Stability	The product does not deteriorate under the influence of outdoor storage for a period of six months.
Storage Safety	The storage of Engineered Wood Fiber should be safe from exposure to ignition sources. A source of water to extinguish any fires that might occur should be in proximity to the storage area.
Material Handling	The equipment used to handle bulk materials is generally satisfactory.

IX. FEDERAL REGULATORY INFORMATION:

OSHA STATUS	Under OSHA rules, Engineered Wood Fiber is considered Non-Hazardous material.

This information is provided without warranty, expressed or implied.

Apollo Sequence Product

BIDDER'S AFFIDAVIT

Before me, the undersigned authority who is duly authorized by law to administer oaths and take acknowledgements, personally appeared

Danielle Cibella

AFFIANT'S NAME (PERSON'S NAME)

Who, after being duly cautioned and sworn, and being fully aware of the penalties of perjury, does hereby depose and declare, on his/her own behalf or as a representative on behalf of a partnership or corporation, or other entity that is the Bidder in the matter at hand, as follows:

1. That the Bidder, if a natural person, is of lawful age.

2. That if the Bidder is a partnership, or a corporation, or other legal person or entity recognized in the State of Florida, it has complied with all laws and ordinances governing the formation and continued existence of such entities, including but not limited to, if a Florida corporation, to the filing of its Articles of Incorporation with the Florida Secretary of State and if a corporation incorporated under the laws of a state other than Florida, that it is duly authorized to do business in the State of Florida; that it is currently an active corporation or entity fully authorized to do business; and that the undersigned is representative of the corporation or entity authorized to make this affirmation and declaration and who has the power to bind said corporation or entity.

3. That if the Bidder is operating under a fictitious name, Bidder has currently complied with and any and all laws and procedures governing the operation of businesses under fictitious names in the State of Florida;

4. That the Bidder has not submitted a rigged Bid, nor engaged in collusive bidding, or a collusive bidding arrangement, or fraudulent bidding, or entered into a conspiracy in connection with this bid with any other natural person, partnership, corporation or other entity making a bid for the same purpose. The Bidder has not entered into any understanding or agreement with any other person or entity where one or more such persons or entities agrees not to bid or fixing the prices to be bid.

5. In the event that the City determines that the Bidder has participated in any collusive, deceptive or fraudulent practices in derogation of the statements in this Affidavit the City, in addition to any other remedy it may exercise, will have the right to debar the Bidder. The contract let under such circumstances shall be deemed invalid.

6. That the Bidder is not in arrears to the City of Tampa upon debt or contract and is not in default, as surety or otherwise, of any obligation to the City, Hillsborough County or the State of Florida

7. That no officer or employee of the City, either individually or through any firm, corporation or business of which he/she is a stockholder or holds office, shall receive any substantial benefit or profit out of the contract or award to this Bidder; nor does the Bidder know of any City officer or employee having any financial interest in assisting the Bidder to obtain, or in any other way effecting, the award of the contract to this Bidder.

8. That, by submitting this bid, the Bidder certifies that he/she has fully read and understands the bid method and has full knowledge of the scope, nature, and quality of work to be performed or the services to be rendered.

9. That, by submitting this Bid, Affiant certifies compliance with Section 287.135, Florida Statutes and for contracts for goods or services of $1 million or more, that the Bidder is not on the Scrutinized Companies with Activities in the Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, and is not engaged in business operations in Cuba or Syria, and that for contracts for goods or services of any amount, that the Bidder is not on the Scrutinized Companies that Boycott Israel List, and is not engaged in a boycott of Israel. Affiant understands that pursuant to Section 287.135, Florida Statutes, the submission of a false certification may subject Bidder to civil penalties, attorney's fees, other costs and termination of any contract that is awarded.

The bid documents contain a General Conditions Section and may, in most cases, contain a Technical Specification Section. General Conditions contain general requirements and Technical Specifications detail the scope of the goods and/or services requested. The Technical Specifications shall always govern whenever there appears to be a conflict.

The Bidder shall comply with the applicable requirements of Federal and state laws, all Codes and Ordinances of the City of Tampa as amended from time to time and any applicable professional regulations.

FURTHER AFFIANT SAYETH NOT.

Bidder: Complete the applicable Acknowledgement for An Individual Acting In His/Her Own Right, A Partnership or A Corporation, according to your firm type.

FOR AN INDIVIDUAL ACTING IN HIS/HER OWN RIGHT

State of _____
County of _____

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization this _____ day of _____ 20____, by _____, who is personally known to me or who has produced identification and who did (did not) take an oath.

_____ _____
Signature of Notary Public Signature of Affiant

Notary Public
State of: _____
My Commission
Expires: _____

_____ _____
Printed, typed or stamped Printed or typed name of Affiant
Commissioned name of notary public

FOR AN ENTITY

State of Florida
County of Sarasota

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☑ physical presence or ☐ online notarization this 15th day of April 2021, by Danielle Cibello, as Vice President, of Apollo Sunguard a ☐ Partnership, ☐ Joint Venture, ☑ Corporation, ☐ Limited Liability Company (LLC) or ☐ Other _____, on behalf of such entity. Such individual is personally known to me or has produced identification.

Type of identification produced: personally Known

Vickie Jo Landers Danielle Cibello
Signature of Notary Public Signature of Affiant

Notary Public
State of: Florida
My Commission
Expires: 12/13/2021

Notary Public State of Florida
Vickie Jo Landers
My Commission GG 167924
Expires 12/13/2021

Vickie Jo Landers Danielle Cibello
Printed, typed or stamped Printed or typed name of Affiant
Commissioned name of notary public

BIDDER SUBMITTAL CHECKLIST
BID DOCUMENTS TO BE RETURNED

BID #: 31041421	
BID TITLE: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, AND INSTALLATION, REPAIRS AND REPLACEMENT	
THE FOLLOWING FORMS MUST BE INCLUDED IN BID PACKAGE PLEASE ACKNOWLEDGE BY ANSWERING "YES"	
	YES
Did you sign your bid? *	✓
Did you sign and complete MBD Forms 10 and 20? *	☑
Did you fully complete the price proposal /bid response page? *	☑
Did you complete the Bidder's Affidavit and associated notarized form? *	☑
If an addendum has been issued that changed the Bid Response Page(s), did you provide pricing on the pages marked "Addendum" *	✓
Did you include catalogs, price sheets and or CD's as indicated per Technical Specification? *	☑
Did you include copies of certificates and or licenses as indicated per Technical Specification? *	☑
Did you include pricing for Engineered Fiber Wood Mulch per Technical Specification? *	N/A ☐
Did you include Manufacture Specifications as per Technical Specification? *	✓
Did you List pricing based on thickness and color options per Section 11 of the Technical Specifications?*	☑
Is your company name clearly be indicated on the attached price sheet?*	☑

*** Failure to submit these forms shall result in your bid being deemed as "non-responsive".**

Requested Voluntary Information Regarding
Bidder's Initial Employment Application Content

The Bidder's own initial application for employment has criminal history screening practices similar in nature to the practices contained in Chapter 12, Article VI – Criminal History Screening Practices, City of Tampa Code of Ordinances. *(Responses, whether "Yes" or "No", are for informational purposes only and will not be used as a basis of award or denial, nor as a basis for any protest)*: [_] Yes [☑] No

Firm Name: Apollo Sunguard Systems Inc

Authorized signature: Dinnith Cibbs Date: 4-15-21

ATTACHMENT A - CONFLICT OF INTEREST DISCLOSURE FORM

For purposes of determining any possible conflict of interest, all bidders/proposers, must disclose if any elected or appointed officer of the City of Tampa, City of Tampa employee(s), or any immediate family member* or close personal relation** of an elected or appointed officer of the City of Tampa or City employee(s) is also an owner, corporate officer, agent, employee, stockholder, or has a controlling financial interest***, etc., of their business.

**Immediate family* means spouse, parents and children of the person involved.

***Close personal relationship* means dating, cohabitation, and/or having an intimate sexual relationship. Dating includes but is not limited to casual dating, serious dating, or casual sexual involvement where the parties have no intention of carrying on a long-term relationship, cohabitation, and any other conduct or behavior normally associated with romantic or sexual relationships. This definition applies regardless of the sexual orientation of the employees involved. Persons involved in a close personal relationship shall be referred to as a "close personal relation."

****Controlling financial interest* means ownership, directly or indirectly, to ten (10) percent or more of the outstanding capital stock in any corporation or a direct or indirect interest of ten (10) percent or more in a firm, partnership, or other business entity or such other interest or position in a business entity sufficient to allow him/her or her to control its operations.

Indicate either "yes" (a City employee, elected or appointed official is also associated with your business), or "no". If yes, give person(s) name(s) and position(s) with your business.

YES _____ NO ✓

NAME(S) / POSITION(S)

_____

_____

_____

_____

FIRM NAME: Apollo Sunguard Systems Inc

BY (PRINTED NAME): Danielle Cizello

BY (SIGNATURE): Danielle Cizello

TITLE: V.P. of Sales

DATE: 4-15-21

BID RESPONSE FOR
SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT

Please Print or Type

We the undersigned, as Bidders, hereby declare that we have carefully read this proposal or bid and the provisions, terms and conditions concerning the equipment, materials, supplies or services as called for, and with full knowledge and understanding of the requirements and conditions, do hereby agree to furnish and to deliver as indicated, FOB, City Facility Location, with all transportation charges prepaid, and for the prices quoted thereon as follows.

I. **Site Furnishings and Playground Equipment**	**Catalog Name**	**Date**	**Discount**
a. Catalog	Apollo Sunguard	2021	30%
b. Catalog			
C. Catalog			
d. Catalog			
e. Catalog			
f. Catalog			

If additional space is needed, attach additional pages using headings as indicated above

2. Installation of Site Furnishings, Playground Equipment, Shelters, Shade Structures, Gazebos, and Trellises, Etc. To be based on a firm fixed percentage of the equipment cost (the total cost after discount has been taken, but before freight has been added).	The firm, fixed percentage is 85 %
3. Is your written factory certification for the installation of playground equipment attached?	Yes (No) N/A
4. If you are using a subcontractor for the installation of playground equipment list the Certified Installer's Company Name/s:	Name: Dragon Recreation Services
5. Does your company provide repair service?	Yes (No) $_____/hour N/A
6. Engineered Wood Fiber Mulch (to include ground preparation and Geotextile separator installation) Is manufacturer's specification data sheet attached?	N/A Yes (No) $_____ per Cu. Ft $_____ per Sq. Ft

7. Surfacing Products (Poured-In-Place Rubber, Artificial Turf, FlexiPave, Concrete and Brick Pavers) Is price table attached Is manufacturer's specification data sheet attached? Have samples been submitted?	Yes Yes Yes	N/A No No No
8. Have you submitted catalog(s), CD(s) or printed price sheet(s) to be considered as part of this bid? Failure to submit may disqualify your bid.	Yes	No
9. Minimum order?	Yes If so, $	No

10. List any Exclusions: N/A

11. Contact Information:

Name: Danielle Cibello Phone: 941-925-3000

Cell: N/A Email: danielle@apollosunguard.com

Firm Name: Apollo Sunguard Systems Inc.

Authorized Representative's Name: Danielle Cibello

Authorized Representative's Title: V.P. of Sales

Address: 4487 A Ashton Road

City: Sarasota State: FL Zip: 34233

Telephone No.: 941-925-3000 Fax No.: 941-925-3001 Email: danielle@apollosunguard.com

Federal I.D. #: 65-1135651

Type Organization: [ ] Individual [ ] Small Business [ ] Non-Profit [ ] LLC
[ ] Partnership [X] Corporation [ ] Joint Venture

Business is licensed (unless exempt by applicable law), permitted and certified to do business in the State of Florida:
[X] Yes [ ] No License # 990010070748

Minority Business Status: [ ] Black [ ] Hispanic [ ] Woman [X] Other

Is your business certified as a minority business with any government agency? [X] Yes [ ] No. If yes, please list below:

Agency Name	Certification Number	Expiration Date
Office of Supplier Diversity	N/A	10-2-21

Sub-Contracting Submittals required: Forms MBD-10, MBD-20 must be submitted with the bid/proposal.

By signing this bid the Bidder complies with all of the requirements of the bid including but not limited to Communication Policy and City of Tampa Ethics Code contained in Section 4 of the GENERAL CONDITIONS.

Authorized Signature: Danielle Cibello Date: 4-15-21

Tampa

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules
City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)
(FORM MBD-10)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421
Company Name: Apollo Sunguard Systems Address: 4487A Ashton Rd. Sarasota FL 34233
Federal ID: 65-1135651 Phone: 941-925-3000 Fax: 941-925-3001 Email: danielle@apollosunguard.com

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.
[ ] No Firms were contacted or solicited for this contract.
[ ] No Firms were contacted because: _____
[✓] See attached list of additional Firms solicited and all supplemental information (List must comply to this form)
Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=WMBE O = Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N
O 84-3450421	Dragon Recreation Services 20685 Wildcat Run Dr. Unit 201 Estero, FL 33928 Ph: 239-565-8645	CM	912	P	Y

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub–contracting opportunities on this contract.

Signed: Danielle Cibello Name/Title: Danielle Cibello VP Sales Date: 4-15-21

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive
Forms must be included with Bid / Proposal

MBD 10 rev./effective 02/2016

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 3 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.: 21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421

Company Name: Apollo Sunguard Systems Address: 4487 A Ashton Rd Sarasota FL 34233

Federal ID: 65-1135651 Phone: 941-925-3000 Fax: 941-925-3001 Email: danielle@apollosunguard.com

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

[X] **See attached list of additional Firms Utilized and all supplemental Information (List must comply to this form)**
Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

[ ] **No Subcontracting/consulting (of any kind) will be performed on this contract.**

[ ] **No Firms are listed to be utilized because:** _____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=WMBE O =Neither / Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials / NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %
O / 84-3450421	Dragon Recreation Services 20655 Wildcat Run Dr Unit 201 Estero, FL 33928 ph: 239-565-8645	CM	912	P	40%

Total ALL Subcontract / Supplier Utilization $ 40%

Total SLBE Utilization $ O

Total WMBE Utilization $ O

Percent SLBE Utilization of Total Bid/Proposal Amt. O **% Percent WMBE Utilization of Total Bid/Proposal Amt.** O **%**

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: Danielle Cibella Name/Title: Danielle Cibella V.P. Sales Date: 4-15-21

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive
Forms must be included with Bid / Proposal

MBD 20 rev./effective 02/2016

ATTACHMENT B

	A	B	C
1		**ATTACHMENT B - PRODUCTS LIST**	
2	**PRODUCTS**	**TYPE**	**MANF. NAME**
3	Benches	**PLAYGROUND & FITNESS EQUIPMENT**	
4	Trash Receptacles	650.12, 650.18	Landscape Structures
5	Bike Racks	650.38, 650.54	Gametime
6	Bollards	650.60, 650.72	Kompan
7	Picnic Tables	650.60, 650.72	Berliner Seilfabrik
8	Bike Repair Station		
9	Play Equipment		
10	-Play Structure	**PLAY SURFACING -**	**MANUFACTURER** D
11	-Free Standing		GT Impax PIP
12	Safety Surfacing	650.5	Vitriturf PIP
13	-PIP		LS Pebble Flex
14	-Eng. Wood Fiber		Surface America PIP
15	-Play Turf		Fibar
16	Dog Waste Station		KorKat
17	Pavers		Forever Lawn
18	- brick		
19	- concrete		Innovative Sports Surfacing
20	Flexi Pave		
21	Shade Structure		
22	-fabric sails		
23	-hard roof	**SITE FURN:**	
24	Turf Support Mtls.		**MANUFACTURER**
25	Perma Trak		Du Mor
26		Comm Codes	Victor Stanley
27		650.06	Anova Furnishings, Inc.
28		650.1	Landscape Forms
29		650.24	Keystone Ridge Designs, Inc.
30		650.36	Kay Park
31		650.38	Belson Outdoors
32			Wabash Valley
33			The Park Catalog
34		120.27	Wausau Tile
35			Namco DoggyDo Station
36			iron Age Designs
37			Ironsmith, Inc.
38			Dura Art Stone
39			Creative Systems-Landscape Brands
40			Park Warehouse
41			mmcite7 LLC
42			Forms + Surfaces
43			
44		**SHADE STRUCTURES & GAZEBO**	
45			**MANUFACTURERS**

ATTACHMENT B

	D	E
1		
2	**DETAILS**	**DISCOUNT %**
3		
4	Play structures & Free Stdg. Pieces	
5	Play structures & Free Stdg. Pieces	
6	Play structures & Free Stdg. Pieces	
7	Play structures & Free Stdg. Pieces	
8		
9		
10	**ETAILS**	
11	Rubber & Engineered wood fiber	
12	Rubber Poured In Place (PIP)	
13	Rubber PIP	
14	Rubber PIP	
15	Eng. Wood Fiber / Rubber PIP	
16	Rubber PIP, Eng. Wood Fiber, Bonded Rubber, Rubber Mulch, Artificial	
17	Artificial Playground Turf	
18		
19	Rubber PIP, Artificial Turf, Court Surface Repair	
20		
21		
22		
23		
24		
25		
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45	**DETAILS**	

ATTACHMENT B

	A	B	C
46			Poligon
47			Shade Systems
48			Appollo Sunguard
49			USA Shade
50			Classic Recreation Systems
51			Tensile Shade Products
52			
53		**MISCELLANEOUS PRODUCTS / MATERIALS**	
54			**MANUFACTURERS**
55			PermaLoc
56			Grass Pave
57			FlexiPave
58			PermaTrak
59			Trex Company, Inc.
60			Geo Block
61			Oldcastle
62			Keystone
63			Pine Hall Brick
64			
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ATTACHMENT B

	D	E
46		
47		
48		30%
49		
50		
51		
52		
53	**ETAILS**	
54		
55	Metal edging	
56	Turf support	
57	Alt. tree grate / paving	
58	Boardwalk system	
59	Decking	
60	Turf support	
61	Block walls	
62	Block walls	
63	Brick Pavers	
64		
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70		

Kompan

BIDDER'S AFFIDAVIT

Before me, the undersigned authority who is duly authorized by law to administer oaths and take acknowledgements, personally appeared

Eric Lewis, Treasurer

AFFIANT'S NAME (PERSON'S NAME)

Who, after being duly cautioned and sworn, and being fully aware of the penalties of perjury, does hereby depose and declare, on his/her own behalf or as a representative on behalf of a partnership or corporation, or other entity that is the Bidder in the matter at hand, as follows:

1. That the Bidder, if a natural person, is of lawful age.

2. That if the Bidder is a partnership, or a corporation, or other legal person or entity recognized in the State of Florida, it has complied with all laws and ordinances governing the formation and continued existence of such entities, including but not limited to, if a Florida corporation, to the filing of its Articles of Incorporation with the Florida Secretary of State and if a corporation incorporated under the laws of a state other than Florida, that it is duly authorized to do business in the State of Florida; that it is currently an active corporation or entity fully authorized to do business; and that the undersigned is representative of the corporation or entity authorized to make this affirmation and declaration and who has the power to bind said corporation or entity.

3. That if the Bidder is operating under a fictitious name, Bidder has currently complied with and any and all laws and procedures governing the operation of businesses under fictitious names in the State of Florida;

4. That the Bidder has not submitted a rigged Bid, nor engaged in collusive bidding, or a collusive bidding arrangement, or fraudulent bidding, or entered into a conspiracy in connection with this bid with any other natural person, partnership, corporation or other entity making a bid for the same purpose. The Bidder has not entered into any understanding or agreement with any other person or entity where one or more such persons or entities agrees not to bid or fixing the prices to be bid.

5. In the event that the City determines that the Bidder has participated in any collusive, deceptive or fraudulent practices in derogation of the statements in this Affidavit the City, in addition to any other remedy it may exercise, will have the right to debar the Bidder. The contract let under such circumstances shall be deemed invalid.

6. That the Bidder is not in arrears to the City of Tampa upon debt or contract and is not in default, as surety or otherwise, of any obligation to the City, Hillsborough County or the State of Florida

7. That no officer or employee of the City, either individually or through any firm, corporation or business of which he/she is a stockholder or holds office, shall receive any substantial benefit or profit out of the contract or award to this Bidder; nor does the Bidder know of any City officer or employee having any financial interest in assisting the Bidder to obtain, or in any other way effecting, the award of the contract to this Bidder.

8. That, by submitting this bid, the Bidder certifies that he/she has fully read and understands the bid method and has full knowledge of the scope, nature, and quality of work to be performed or the services to be rendered.

9. That, by submitting this Bid, Affiant certifies compliance with Section 287.135, Florida Statutes and for contracts for goods or services of $1 million or more, that the Bidder is not on the Scrutinized Companies with Activities in the Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, and is not engaged in business operations in Cuba or Syria, and that for contracts for goods or services of any amount, that the Bidder is not on the Scrutinized Companies that Boycott Israel List, and is not engaged in a boycott of Israel. Affiant understands that pursuant to Section 287.135, Florida Statutes, the submission of a false certification may subject Bidder to civil penalties, attorney's fees, other costs and termination of any contract that is awarded.

The bid documents contain a General Conditions Section and may, in most cases, contain a Technical Specification Section. General Conditions contain general requirements and Technical Specifications detail the scope of the goods and/or services requested. The Technical Specifications shall always govern whenever there appears to be a conflict.

The Bidder shall comply with the applicable requirements of Federal and state laws, all Codes and Ordinances of the City of Tampa as amended from time to time and any applicable professional regulations.

FURTHER AFFIANT SAYETH NOT.
Bidder: Complete the applicable Acknowledgement for An Individual Acting In His/Her Own Right, A Partnership or A Corporation, according to your firm type.

FOR AN INDIVIDUAL ACTING IN HIS/HER OWN RIGHT

State of _____
County of _____

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization this _____ day of _____ 20____, by _____, who is personally known to me or who has produced identification and who did (did not) take an oath.

_____ Signature of Notary Public

_____ Signature of Affiant

Notary Public
State of: _____
My Commission
Expires: _____

_____ Printed, typed or stamped Commissioned name of notary public

_____ Printed or typed name of Affiant

FOR AN ENTITY

State of Texas
County of Travis

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or ☐ online notarization this 21 day of April 2021, by Eric Lewis, as Controller, of Kompan, INC a ☐ Partnership, ☐ Joint Venture, ☒ Corporation, ☐ Limited Liability Company (LLC) or ☐ Other _____, on behalf of such entity. Such individual is personally known to me or has produced identification.

Type of identification produced: _____

Jennifer Powell
Signature of Notary Public

Signature of Affiant

Notary Public
State of: _____
My Commission
Expires: _____

JENNIFER POWELL
Notary ID #131711183
My Commission Expires
September 5, 2022

Jennifer Powell
Printed, typed or stamped Commissioned name of notary public

Eric Lewis
Printed or typed name of Affiant

BIDDER SUBMITTAL CHECKLIST
BID DOCUMENTS TO BE RETURNED

BID #: 31041421	
BID TITLE: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, AND INSTALLATION, REPAIRS AND REPLACEMENT	
THE FOLLOWING FORMS MUST BE INCLUDED IN BID PACKAGE PLEASE ACKNOWLEDGE BY ANSWERING "YES"	
	YES
Did you sign your bid? *	X
Did you sign and complete MBD Forms 10 and 20? *	X
Did you fully complete the price proposal /bid response page? *	X
Did you complete the Bidder's Affidavit and associated notarized form? *	X
If an addendum has been issued that changed the Bid Response Page(s), did you provide pricing on the pages marked "Addendum" *	X
Did you include catalogs, price sheets and or ~~CD~~ USB Drives's as indicated per Technical Specification? *	X
Did you include copies of certificates and or licenses as indicated per Technical Specification? *	X
Did you include pricing for Engineered Fiber Wood Mulch per Technical Specification? *	X
Did you include Manufacture Specifications as per Technical Specification? *	X
Did you List pricing based on thickness and color options per Section 11 of the Technical Specifications?*	X
Is your company name clearly be indicated on the attached price sheet?*	X

*** Failure to submit these forms shall result in your bid being deemed as "non-responsive".**

Requested Voluntary Information Regarding
Bidder's Initial Employment Application Content

The Bidder's own initial application for employment has criminal history screening practices similar in nature to the practices contained in Chapter 12, Article VI – Criminal History Screening Practices, City of Tampa Code of Ordinances. *(Responses, whether "Yes" or "No", are for informational purposes only and will not be used as a basis of award or denial, nor as a basis for any protest)*: [X] Yes [_] No *Background Check before Hire

Firm Name: Kompan, Inc.

Authorized signature:  Date: 4.21.2021

ATTACHMENT A - CONFLICT OF INTEREST DISCLOSURE FORM

For purposes of determining any possible conflict of interest, all bidders/proposers, must disclose if any elected or appointed officer of the City of Tampa, City of Tampa employee(s), or any immediate family member* or close personal relation** of an elected or appointed officer of the City of Tampa or City employee(s) is also an owner, corporate officer, agent, employee, stockholder, or has a controlling financial interest***, etc., of their business.

**Immediate family* means spouse, parents and children of the person involved.

***Close personal relationship* means dating, cohabitation, and/or having an intimate sexual relationship. Dating includes but is not limited to casual dating, serious dating, or casual sexual involvement where the parties have no intention of carrying on a long-term relationship, cohabitation, and any other conduct or behavior normally associated with romantic or sexual relationships. This definition applies regardless of the sexual orientation of the employees involved. Persons involved in a close personal relationship shall be referred to as a "close personal relation."

****Controlling financial interest* means ownership, directly or indirectly, to ten (10) percent or more of the outstanding capital stock in any corporation or a direct or indirect interest of ten (10) percent or more in a firm, partnership, or other business entity or such other interest or position in a business entity sufficient to allow him/her or her to control its operations.

Indicate either "yes" (a City employee, elected or appointed official is also associated with your business), or "no". If yes, give person(s) name(s) and position(s) with your business.

YES _____ NO x ____

NAME(S) / POSITION(S)

_____

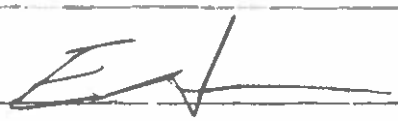
_____

_____

_____

FIRM NAME: Kompan, Inc

BY (PRINTED NAME): Eric Lewis

BY (SIGNATURE): 

TITLE: Controller

DATE: 4.21.2021

BID RESPONSE FOR
SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT

Please Print or Type

We the undersigned, as Bidders, hereby declare that we have carefully read this proposal or bid and the provisions, terms and conditions concerning the equipment, materials, supplies or services as called for, and with full knowledge and understanding of the requirements and conditions, do hereby agree to furnish and to deliver as indicated, FOB, City Facility Location, with all transportation charges prepaid, and for the prices quoted thereon as follows.

I. **Site Furnishings and Playground Equipment**	**Catalog Name**	**Date**	**Discount**
a. Catalog	Kompan 2021 Outdoor Play, Fitness and Furniture	04.15.2021	9%
b. Catalog	Dog Park Equipment - See Kompan Catalog and Barks and Rec 2021	04.15.2021	4%
C. Catalog			
d. Catalog			
e. Catalog			
f. Catalog			

If additional space is needed, attach additional pages using headings as indicated above

2. Installation of Site Furnishings, Playground Equipment, Shelters, Shade Structures, Gazebos, and Trellises, Etc. To be based on a firm fixed percentage of the equipment cost (the total cost after discount has been taken, but before freight has been added).	The firm, fixed percentage is see below % Equipment 30% Site Equipment 60% Shade 100%
3. Is your written factory certification for the installation of playground equipment attached?	Yes No
4. If you are using a subcontractor for the installation of playground equipment list the Certified Installer's Company Name/s:	Name: Precision Playgrounds, Inc.
5. Does your company provide repair service?	Yes No $ 200.00 /hour
6. Engineered Wood Fiber Mulch (to include ground preparation and Geotextile separator installation) Is manufacturer's specification data sheet attached?	See TPP price list for EWF/FF Yes No $ 1.97 per Cu. Ft $ 1.97 per Sq. Ft at 12" depth

7. Surfacing Products (Poured-In-Place Rubber, Artificial Turf, FlexiPave, Concrete and Brick Pavers) Is price table attached Is manufacturer's specification data sheet attached? Have samples been submitted?	Yes *see exclusions No Yes No Yes No
8. Have you submitted catalog(s), CD(s) or printed price sheet(s) to be considered as part of this bid? Failure to submit may disqualify your bid.	Yes No
9. Minimum order?	Yes No If so, $ 0

10. List any Exclusions:

*Flexipave, concrete, and brick pavers not included in pricing.

11. Contact Information:

Name: Dara Sizemore Phone: 813-404-9534

Cell: same Email: DarSiz@KOMPAN.com

Firm Name: Kompan, Inc.

Authorized Representative's Name: Eric Lewis

Authorized Representative's Title: Treasurer

Address: 605 W. Howard Lane, Ste 101

City: Austin State: TX Zip: 78753

Telephone No.: 800-426-9788 Fax No.: 512-788-9285 Email: EriLew@KOMPAN.com

Federal I.D. #: 91-0819688

Type Organization: [ ] Individual [ ] Small Business [ ] Non-Profit [ ] LLC
[ ] Partnership [x] Corporation [ ] Joint Venture

Business is licensed (unless exempt by applicable law), permitted and certified to do business in the State of Florida:
[x] Yes [ ] No License # F12000002586

Minority Business Status: [ ] Black [ ] Hispanic [ ] Woman [ ] Other

Is your business certified as a minority business with any government agency? [ ] Yes [x] No. If yes, please list below:

Agency Name	Certification Number	Expiration Date

Sub-Contracting Submittals required: Forms MBD-10, MBD-20 must be submitted with the bid/proposal.

By signing this bid the Bidder complies with all of the requirements of the bid including but not limited to Communication Policy and City of Tampa Ethics Code contained in Section 4 of the GENERAL CONDITIONS.

Authorized Signature: _____ Date: 4.15.2021

Eric Lewis, Treasurer

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules
City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)
(FORM MBD-10)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421

Company Name: Kompan, Inc Address: 605 W. Howard Lane Ste 101 Austin TX 78753

Federal ID: 91-0819688 Phone: 800-426-9788 Fax: 512-788-9285 Email: EriLew@KOMPAN.com

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.

[ ] No Firms were contacted or solicited for this contract.

[x] No Firms were contacted because: 2 Firms listed in the system (tampa.diversity) are our competitors. Florida Play Structures, Topline , none found for Surfacing either

[ ] See attached list of additional Firms solicited and all supplemental information (List must comply to this form)

Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=WMBE O = Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N

Failure to Complete, Sign and Submit this form with your Bid or Proposal Shall render the Bid Non-Responsive (Do Not Modify This Form)

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub–contracting opportunities on this contract.

Signed: _____ Name/Title: Eric Lewis, Treasurer Date: 4.15.2021

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

MBD 10 rev./effective 02/2016

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 3 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421

Company Name: Kompan, Inc. Address: 605 W. Howard Lane, Ste 101 Austin, TX 78753

Federal ID: 91-0819688 Phone: 800-426-9788 Fax: 512-788-9285 Email: EriLew@KOMPAN.com

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

[ ] See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)
Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

[ ] No Subcontracting/consulting (of any kind) will be performed on this contract.

[x] No Firms are listed to be utilized because: Firms found are our competitors.

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=WMBE O =Neither / Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %
O 331204851	Precision Playgrounds - Holdings, Inc 45 Alabama Avenue Jacksonville, FL 32218 US stacey@precisioinplaygounds.com	M	Playground Installation	n/a	as needed
O	The Fibar Group 80 Business Park Drive Armonk NY 10504 info@fibar.com	M	EWF	na	as needed
O	Duraplay 150 Brownson Ln Driftwood, TX 78619 jenn@duraplay.com	M	PIP Surfacing	na	as needed
O	ProTechs 2072 Boch Rd Akron, OH 44321 www.prot-techssurfacing.com	M	Turf	na	as needed

Failure to Complete, Sign and Submit this form with your Bid or Proposal shall render the Bid Non-Responsive (Do Not Modify This Form)

Total ALL Subcontract / Supplier Utilization $ as needed

Total SLBE Utilization $ _____

Total WMBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. 0 **%** **Percent WMBE Utilization of Total Bid/Proposal Amt.** 0 **%**

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: _____ Name/Title: Eric Lewis, Treasurer Date: 4.15.2021

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive
Forms must be included with Bid / Proposal

MBD 20 rev./effective 02/2016

Pour In Place & Bonded Rubber Pricing

KOMPAN®

PIP-3CFH-1000+	surfacing 1000sf - 1999sf	3' CFH	$ 17.67
PIP-4CFH-1000+	surfacing 1000sf - 1999sf	4' CFH	$ 19.02
PIP-5CFH-1000+	surfacing 1000sf - 1999sf	5' CFH	$ 20.42
PIP-6CFH-1000+	surfacing 1000sf - 1999sf	6' CFH	$ 21.11
PIP-8CFH-1000+	surfacing 1000sf - 1999sf	8' CFH	$ 23.00
PIP-9CFH-1000+	surfacing 1000sf - 1999sf	9' CFH	$ 24.75
PIP-10CFH-1000+	surfacing 1000sf - 1999sf	10' CFH	$ 34.23
PIP-12CFH-1000+	surfacing 1000sf - 1999sf	12' CFH	$ 36.43
PIP-3CFH-2000+	surfacing 2000 sf - 3500 sf	3' CFH	$ 16.64
PIP-4CFH-2000+	surfacing 2000 sf - 3500 sf	4' CFH	$ 17.59
PIP-5CFH-2000+	surfacing 2000 sf - 3500 sf	5' CFH	$ 18.76
PIP-6CFH-2000+	surfacing 2000 sf - 3500 sf	6' CFH	$ 20.28
PIP-8CFH-2000+	surfacing 2000 sf - 3500 sf	8' CFH	$ 21.59
PIP-9CFH-2000+	surfacing 2000 sf - 3500 sf	9' CFH	$ 22.76
PIP-10CFH-2000+	surfacing 1000sf - 1999sf	10' CFH	$ 34.23
PIP-12CFH-2000+	surfacing 1000sf - 1999sf	12' CFH	$ 36.43
PIP-3CFH-3500+	surfacing 3500 sf plus	3' CFH	$ 16.42
PIP-4CFH-3500+	surfacing 3500 sf plus	4' CFH	$ 17.36
PIP-5CFH-3500+	surfacing 3500 sf plus	5' CFH	$ 18.52
PIP-6CFH-3500+	surfacing 3500 sf plus	6' CFH	$ 20.02
PIP-8CFH-3500+	surfacing 3500 sf plus	8' CFH	$ 21.59
PIP-9CFH-3500+	surfacing 3500 sf plus	9' CFH	$ 22.61
PIP-10CFH-3500+	surfacing 1000sf - 1999sf	10' CFH	$ 34.23
PIP-12CFH-3500+	surfacing 1000sf - 1999sf	12' CFH	$ 36.43
PIP-100%COLOR	Additional charge 100% color	Per SF	$ 4.72
PIP-SUBBASE	4" crushed rock subbase	Per SF	$ 5.80
BNDRUB-4CFH-1000+	bonded rubber surfacing	4' CFH	$ 13.70
BNDRUB-5CFH-1000+	bonded rubber surfacing	5' CFH	$ 15.61
BNDRUB-6CFH-1000+	bonded rubber surfacing	6' CFH	$ 16.97
BNDRUB-8CFH-1000+	bonded rubber surfacing	8' CFH	$ 20.74
BNDRUB-10CFH-1000+	bonded rubber surfacing	10' CFH	$ 22.62

Pricing is based upon: 50% color/50% black standard color mix; Aromatic Urethane Binder, Direct access to work area.

An additional charge will be applied for: Prevailing wage jobs; Graphics or designs; 100% color; Non-standard colors (ask for color selections); Aliphatic Binder; Sales tax; Trash removal; Site security; Site preparation; Roof top installation and limited access work sites; Non-standard work hours (i.e. weekends, nights); Phased installation that requires re-mobilizations.
Pricing does not apply for Alaska and Hawaii, please request a quote for pricing for installations in those states.
Pricing does not apply for jobs under 1000 Square Feet, please request a quote for pricing for smaller jobs.
Yellow highlighted product numbers are for bonded rubber surfacing, and are

Turf Pricing

KOMPAN®

Playground Turf 2021 Price List			
Item No.	Description	Description	Price
TURF-8CFH-1000+	TURF-8CFH-1000+	Per Square Foot	$ 25.83
TURF-8CFH-2000+	2000 SF - 2999 SF	Per Square Foot	$ 24.41
TURF-8CFH-3000+	3000+ SF	Per Square Foot	$ 23.28
TURF-SUBBASE	4" compacted stone subbase	Per Square Foot	$ 5.80

Price includes 8' Critical Fall Height, Cushion Layer, Nailer Board, Sand Infill, Installation and Freight

Pricing is based upon: Direct access to work area; Standard wages; Minimum 1000 Square Feet job; Job site within 500 miles of Installer facility.

An additional charge will be applied for: Prevailing Wage jobs; Graphics or Designs; Non-Standard colors (ask for color selection); Sales Tax; Trash removal; Site Security; Site Preparation; Roof top installation and limited access work sites; Non-standard work hours (i.e. weekends,nights) Phased installations that require multiple mobilizations; Job sites more than 500 miles from the Installer facility.

Pricing does not apply for Alaska and Hawaii, please request a quote for pricing for installations in those states.

Pricing does not apply for jobs under 1000 Square Feet, please request a quote for pricing for smaller jobs.

EWF, Borders, Ramps, & Wearmats

KOMPAN®

Engineered Wood Fiber 2021 Price List				unit
TFG-FL-GS-14-01	EWF&FF/CFH 14'/12""comp.		$ 1.51	per sf
Playground Borders, ADA Ramps, Swing Mats 2021 Price List				
Item No.	Description		2021 Price	
APS-BORDER12	12" border w/spike-black		$ 33.60	ea
APS-BORDER8	8" border w/ spike-black		$ 28.35	ea
APS-ADA-HALFRAMP	ADA Half Ramp System		$ 530.25	ea
APS-ADA RAMP	ADA Full Ramp System		$ 850.50	ea
EC-WEARMAT	Swing-Slide Mat- Black	3' x 3' x 1.5"	$ 86.10	ea
Prices do not include freight or installation				

Rubber Mulch Pricing

KOMPAN

Rubber Mulch 2021 Price List		
Item No.	**Description**	**Price**
LTR-LTSCRMN8CB	Cedar Red 98/20lb bags	$ 650.68
LTR-LTSMBMN8CB	Mocha Brown 98/20lb bags	$ 650.68
LTR-LTSEBMN8CB	Espresso Black 98/20lb bags	$ 650.68
LTR-LTSBUMN8CB	Blue 98/20lb bags	$ 650.68
LTR-LTSGRMN8CB	Green 98/20lb bags	$ 650.68
LTR-LTGCRMN5TS	Cedar Red 1,000 lb super sack	$ 331.59
LTR-LTGMBMN5TS	Mocha Brown 1,000 lb super sack	$ 331.59
LTR-LTGEBMN5TS	Espresso Black 1,000 lb super sack	$ 331.59
LTR-LTGBUMN5TS	Blue 1,000 lb super sack	$ 331.59
LTR-LTGGRMN5TS	Green 1,000 lb super sack	$ 331.59
LTR-LTGCRMN1TS	Cedar Red 2,000 lb super sack	$ 610.94
LTR-LTGMBMN1TS	Mocha Brown 2,000 lb super sack	$ 610.94
LTR-LTGEBMN1TS	Espresso Black 2,000 lb super sack	$ 610.94
LTR-LTGBUMN1TS	Blue 2,000 lb super sack	$ 610.94
LTR-LTGGRMN1TS	Green 2,000 lb super sack	$ 610.94
LTR-LTGUCMN1TS	Uncoated 2,000 lb super sack	$ 349.76
Prices do not include freight or installation		

State of Florida
Department of State

I certify from the records of this office that KOMPAN, INC. is a Delaware corporation authorized to transact business in the State of Florida, qualified on June 20, 2012.

The document number of this corporation is F12000002586.

I further certify that said corporation has paid all fees due this office through December 31, 2020, that its most recent annual report/uniform business report was filed on June 12, 2020, 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 Seventh day of January, 2021

Secretary of State

Tracking Number: 8207446431CU

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

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

FLORIDA

2021 Florida Annual Resale Certificate for Sales Tax

DR-13
R. 10/20

This Certificate Expires on December 31, 2021

Business Name and Location Address

KOMPAN, INC.
605 W HOWARD LN STE 101
AUSTIN, TX 78753-9786

Certificate Number

78-8015974538-9

By extending this certificate or the certificate number to a selling dealer to make eligible purchases of taxable property or services exempt from sales tax and discretionary sales surtax, the person or business named above certifies that the taxable property or services purchased or rented will be resold or re-rented for one or more of the following purposes:

- Resale as tangible personal property.
- Re-rental as tangible personal property.
- Resale of services.
- Re-rental as commercial real property.
- Incorporation into tangible personal property being repaired.
- Re-rental as transient rental property.
- Incorporation as a material, ingredient, or component part of tangible personal property that is being produced for sale by manufacturing, compounding, or processing.

Your *Florida Annual Resale Certificate for Sales Tax* (Annual Resale Certificate) allows you or your representatives to buy or rent property or services tax exempt when the property or service is resold or re-rented. You **may not** use your Annual Resale Certificate to make tax-exempt purchases or rentals of property or services that will be used by your business or for personal purposes. Florida law provides for criminal and civil penalties for fraudulent use of an Annual Resale Certificate.

As a seller, you must document each tax-exempt sale for resale using one of three methods. You can use a different method each time you make a tax-exempt sale for resale.

1. Obtain a copy (paper or electronic) of your customer's current Annual Resale Certificate.
2. For each sale, obtain a transaction authorization number using your customer's Annual Resale Certificate number.
3. Each calendar year, obtain annual vendor authorization numbers for your regular customers using their Annual Resale Certificate numbers.

Online: Visit **floridarevenue.com/taxes/certificates**

Phone: 877-357-3725 and enter your customer's Annual Resale Certificate number

Mobile App: Available for iPhone, iPad, and Android devices

National Recreation and Park Association

Let it be known that

AMY HARNS

has met the requirements of the standards set forth by the
National Certification Board
and is hereby granted certification as a

Certified Playground Safety Inspector

CHAIRPERSON

NRPA PRESIDENT AND CEO

February 21, 2020
DATE CERTIFIED

48421-0323
CERTIFICATION NUMBER

March 01, 2023
EXPIRATION DATE

NRPA National Recreation and Park Association
Because everyone deserves a great park

KOMPAN

Installer Certification

Let it be known that

KOMPAN, Inc.

hereby recognizes the successful completion by:

Precision Playgrounds

in the KOMPAN Certification Program
and the above is hereby recognized as a

KOMPAN Certified Installer

Joe McGuan

Joe McGuan, KOMPAN, Inc.

May 20, 2014

Date

Ron DeSantis, Governor

Halsey Beshears, Secretary

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

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

CRAFT, SCOTT A

PRECISION PLAYGROUNDS- JAX INC
45 ALABAMA AVE, SUITE 200
JACKSONVILLE FL 32218

LICENSE NUMBER: CGC1511996

EXPIRATION DATE: AUGUST 31, 2022

Always verify licenses online at MyFloridaLicense.com

Do not alter this document in any form.

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

National Recreation and Park Association

Let it be known that

JAY OROURKE

has met the requirements of the standards set forth by the
National Certification Board
and is hereby granted certification as a

Certified Playground Safety Inspector

CPSI Certified Playground Safety Inspector

CHAIRPERSON

NRPA PRESIDENT AND CEO

March 01, 2019
DATE CERTIFIED

44728-0422
CERTIFICATION NUMBER

April 01, 2022
EXPIRATION DATE

NRPA National Recreation and Park Association

Play Space Svc
ARC

BIDDER'S AFFIDAVIT

Before me, the undersigned authority who is duly authorized by law to administer oaths and take acknowledgements, personally appeared

Paul Bickham

AFFIANT'S NAME (PERSON'S NAME)

Who, after being duly cautioned and sworn, and being fully aware of the penalties of perjury, does hereby depose and declare, on his/her own behalf or as a representative on behalf of a partnership or corporation, or other entity that is the Bidder in the matter at hand, as follows:

1. That the Bidder, if a natural person, is of lawful age.

2. That if the Bidder is a partnership, or a corporation, or other legal person or entity recognized in the State of Florida, it has complied with all laws and ordinances governing the formation and continued existence of such entities, including but not limited to, if a Florida corporation, to the filing of its Articles of Incorporation with the Florida Secretary of State and if a corporation incorporated under the laws of a state other than Florida, that it is duly authorized to do business in the State of Florida; that it is currently an active corporation or entity fully authorized to do business; and that the undersigned is representative of the corporation or entity authorized to make this affirmation and declaration and who has the power to bind said corporation or entity.

3. That if the Bidder is operating under a fictitious name, Bidder has currently complied with and any and all laws and procedures governing the operation of businesses under fictitious names in the State of Florida;

4. That the Bidder has not submitted a rigged Bid, nor engaged in collusive bidding, or a collusive bidding arrangement, or fraudulent bidding, or entered into a conspiracy in connection with this bid with any other natural person, partnership, corporation or other entity making a bid for the same purpose. The Bidder has not entered into any understanding or agreement with any other person or entity where one or more such persons or entities agrees not to bid or fixing the prices to be bid.

5. In the event that the City determines that the Bidder has participated in any collusive, deceptive or fraudulent practices in derogation of the statements in this Affidavit the City, in addition to any other remedy it may exercise, will have the right to debar the Bidder. The contract let under such circumstances shall be deemed invalid.

6. That the Bidder is not in arrears to the City of Tampa upon debt or contract and is not in default, as surety or otherwise, of any obligation to the City, Hillsborough County or the State of Florida

7. That no officer or employee of the City, either individually or through any firm, corporation or business of which he/she is a stockholder or holds office, shall receive any substantial benefit or profit out of the contract or award to this Bidder; nor does the Bidder know of any City officer or employee having any financial interest in assisting the Bidder to obtain, or in any other way effecting, the award of the contract to this Bidder.

8. That, by submitting this bid, the Bidder certifies that he/she has fully read and understands the bid method and has full knowledge of the scope, nature, and quality of work to be performed or the services to be rendered.

9. That, by submitting this Bid, Affiant certifies compliance with Section 287.135, Florida Statutes and for contracts for goods or services of $1 million or more, that the Bidder is not on the Scrutinized Companies with Activities in the Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, and is not engaged in business operations in Cuba or Syria, and that for contracts for goods or services of any amount, that the Bidder is not on the Scrutinized Companies that Boycott Israel List, and is not engaged in a boycott of Israel. Affiant understands that pursuant to Section 287.135, Florida Statutes, the submission of a false certification may subject Bidder to civil penalties, attorney's fees, other costs and termination of any contract that is awarded.

The bid documents contain a General Conditions Section and may, in most cases, contain a Technical Specification Section. General Conditions contain general requirements and Technical Specifications detail the scope of the goods and/or services requested. The Technical Specifications shall always govern whenever there appears to be a conflict.

The Bidder shall comply with the applicable requirements of Federal and state laws, all Codes and Ordinances of the City of Tampa as amended from time to time and any applicable professional regulations.

FURTHER AFFIANT SAYETH NOT.

Bidder: Complete the applicable Acknowledgement for An Individual Acting In His/Her Own Right, A Partnership or A Corporation, according to your firm type.

FOR AN INDIVIDUAL ACTING IN HIS/HER OWN RIGHT

State of _____
County of _____

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization this _____ day of _____ 20____, by _____, who is personally known to me or who has produced identification and who did (did not) take an oath.

_____ _____
Signature of Notary Public Signature of Affiant

Notary Public
State of: _____
My Commission
Expires: _____

_____ _____
Printed, typed or stamped Commissioned name of notary public Printed or typed name of Affiant

FOR AN ENTITY

State of Florida
County of Brevard

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or ☐ online notarization this 6th day of April 2021, by Paul Bickham, as Manager, of Advanced Recreational Concepts, LLC. a ☐ Partnership, ☐ Joint Venture, ☐ Corporation, ☒ Limited Liability Company (LLC) or ☐ Other _____, on behalf of such entity. Such individual is personally known to me or has produced identification.

Type of identification produced: _____

_____ _____
Signature of Notary Public Signature of Affiant

Notary Public
State of: Florida
My Commission
Expires: 9/25/22

TAMARA L ORTIZ
Notary Public - State of Florida
Commission # GG 261965
My Comm. Expires Sep 25, 2022
Bonded through National Notary Assn.

Tamara L Ortiz Pau Bickham
Printed, typed or stamped Commissioned name of notary public Printed or typed name of Affiant

BIDDER SUBMITTAL CHECKLIST
BID DOCUMENTS TO BE RETURNED

BID #: 31041421	
BID TITLE: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, AND INSTALLATION, REPAIRS AND REPLACEMENT	
THE FOLLOWING FORMS MUST BE INCLUDED IN BID PACKAGE PLEASE ACKNOWLEDGE BY ANSWERING "YES"	
	YES
Did you sign your bid? *	X
Did you sign and complete MBD Forms 10 and 20? *	X
Did you fully complete the price proposal /bid response page? *	X
Did you complete the Bidder's Affidavit and associated notarized form? *	X
If an addendum has been issued that changed the Bid Response Page(s), did you provide pricing on the pages marked "Addendum" *	X
Did you include catalogs, price sheets and or CD's as indicated per Technical Specification? *	X
Did you include copies of certificates and or licenses as indicated per Technical Specification? *	X
Did you include pricing for Engineered Fiber Wood Mulch per Technical Specification? *	X
Did you include Manufacture Specifications as per Technical Specification? *	X
Did you List pricing based on thickness and color options per Section 11 of the Technical Specifications?*	X
Is your company name clearly be indicated on the attached price sheet?*	X

*** Failure to submit these forms shall result in your bid being deemed as "non-responsive".**

Requested Voluntary Information Regarding
Bidder's Initial Employment Application Content

The Bidder's own initial application for employment has criminal history screening practices similar in nature to the practices contained in Chapter 12, Article VI – Criminal History Screening Practices, City of Tampa Code of Ordinances. *(Responses, whether "Yes" or "No", are for informational purposes only and will not be used as a basis of award or denial, nor as a basis for any protest)*: [X] Yes [_] No

Firm Name: Advanced Recreational Concepts

Authorized signature: _____ Date: 04.06.2021

ATTACHMENT A - CONFLICT OF INTEREST DISCLOSURE FORM

For purposes of determining any possible conflict of interest, all bidders/proposers, must disclose if any elected or appointed officer of the City of Tampa, City of Tampa employee(s), or any immediate family member* or close personal relation** of an elected or appointed officer of the City of Tampa or City employee(s) is also an owner, corporate officer, agent, employee, stockholder, or has a controlling financial interest***, etc., of their business.

**Immediate family* means spouse, parents and children of the person involved.

***Close personal relationship* means dating, cohabitation, and/or having an intimate sexual relationship. Dating includes but is not limited to casual dating, serious dating, or casual sexual involvement where the parties have no intention of carrying on a long-term relationship, cohabitation, and any other conduct or behavior normally associated with romantic or sexual relationships. This definition applies regardless of the sexual orientation of the employees involved. Persons involved in a close personal relationship shall be referred to as a "close personal relation."

****Controlling financial interest* means ownership, directly or indirectly, to ten (10) percent or more of the outstanding capital stock in any corporation or a direct or indirect interest of ten (10) percent or more in a firm, partnership, or other business entity or such other interest or position in a business entity sufficient to allow him/her or her to control its operations.

Indicate either "yes" (a City employee, elected or appointed official is also associated with your business), or "no". If yes, give person(s) name(s) and position(s) with your business.

YES _____ NO X

NAME(S) / POSITION(S)

_____

_____

_____

_____

FIRM NAME: Advanced Recreational Concepts

BY (PRINTED NAME): Paul Bickham

BY (SIGNATURE): _____

TITLE: Manager

DATE: 04.06.2021

BID RESPONSE FOR
SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT

Please Print or Type

We the undersigned, as Bidders, hereby declare that we have carefully read this proposal or bid and the provisions, terms and conditions concerning the equipment, materials, supplies or services as called for, and with full knowledge and understanding of the requirements and conditions, do hereby agree to furnish and to deliver as indicated, FOB, City Facility Location, with all transportation charges prepaid, and for the prices quoted thereon as follows.

I. **Site Furnishings and Playground Equipment**	**Catalog Name**	**Date**	**Discount**
a. Catalog	Playcraft Systems	2021	2%
b. Catalog	IdSculpture	2021	2%
C. Catalog	UltraPlay	2021	2%
d. Catalog	Ultrasite	2021	2%
e. Catalog	ActionFit	2021	3%
f. Catalog	ICON	2021	2%
If additional space is needed, attach additional pages using headings as indicated above			

2. Installation of Site Furnishings, Playground Equipment, Shelters, Shade Structures, Gazebos, and Trellises, Etc. To be based on a firm fixed percentage of the equipment cost (the total cost after discount has been taken, but before freight has been added).	The firm, fixed percentage is 37 %
3. Is your written factory certification for the installation of playground equipment attached?	Yes X No
4. If you are using a subcontractor for the installation of playground equipment list the Certified Installer's Company Name/s:	Name: Playspace Services
5. Does your company provide repair service?	Yes ✓ No $ 197.50 /hour (Please reference Playspace Services Catalog)
6. Engineered Wood Fiber Mulch (to include ground preparation and Geotextile separator installation) Is manufacturer's specification data sheet attached?	Yes ✓ No Mulch $65 per Cu. Yd Geotextile $.47 per Sq. Ft

Site Furnishings and Playground Equipment	Catalog Name	Date	Discount
g. Catalog	SRP Shade	2021	2%
h. Catalog	Waterspalsh	2021	2%
i. Catalog	Playtopia	2021	2%
j. Catalog	Grounds for Play	2021	2%
k. Catalog	Playspace Services – install services	2021	2%
l. Catalog	Cedar Forest Shelters	2021	2%
m. Catalog	RCP Shelters	2021	2%
n. Catalog	Freenotes Harmony	2021	2%
o. Catalog	Childforms	2021	2%

7. Surfacing Products (Poured-In-Place Rubber, Artificial Turf, FlexiPave, Concrete and Brick Pavers) Is price table attached Is manufacturer's specification data sheet attached? Have samples been submitted?	Yes ✓ Yes ✓ Yes ✓	No No No
8. Have you submitted catalog(s), CD(s) or printed price sheet(s) to be considered as part of this bid? Failure to submit may disqualify your bid.	Yes ✓	No
9. Minimum order?	Yes If so, $_____	No ✓

10. List any Exclusions:

11. Contact Information:

Name: Matt Gagnon Phone: 352-835-9008

Cell: 352-835-9008 Email: mgagnon@arcflorida.com

Firm Name: Advanced Recreational Concepts

Authorized Representative's Name: Matt Gagnon

Authorized Representative's Title: Project Manager

Address: 3125 Skyway Cir

City: Melbourne State: FL Zip: 32934

Telephone No.: 321-775-0600 Fax No.: _____ Email: INFO@ARCFLORIDA.COM

Federal I.D. #: 20-0520823

Type Organization: [ ] Individual [ ] Small Business [ ] Non-Profit [X] LLC
[ ] Partnership [ ] Corporation [ ] Joint Venture

Business is licensed (unless exempt by applicable law), permitted and certified to do business in the State of Florida:
[X] Yes [ ] No License # CBC1261271

Minority Business Status: [ ] Black [X] Hispanic [ ] Woman [ ] Other

Is your business certified as a minority business with any government agency? [X] Yes [ ] No. If yes, please list below:

Agency Name	Certification Number	Expiration Date
Office of Supplier Diversity		10.17.2021

Sub-Contracting Submittals required: Forms MBD-10, MBD-20 must be submitted with the bid/proposal.

By signing this bid the Bidder complies with all of the requirements of the bid including but not limited to Communication Policy and City of Tampa Ethics Code contained in Section 4 of the GENERAL CONDITIONS.

Authorized Signature: _____ Date: 04.06.2021

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules
City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)
(FORM MBD-10)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421

Company Name: Playspace Services Address: 3125 Skyway Cir, Melbourne, FL 32934

Federal ID: 59-3136444 Phone: 321-775-0600 Fax: _____ Email: info@playspaceservices.com

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.

[ ] No Firms were contacted or solicited for this contract.

[ ] No Firms were contacted because: _____

[X] See attached list of additional Firms solicited and all supplemental information (List must comply to this form)

Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=WMBE O = Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N
O 59-3136444	Playspace Services 3125 Skyway Cir Melbourne Fl 32901 info@playspaceservices.com	HF HM	914 912 912-77	E	Y

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub–contracting opportunities on this contract.

Signed: _____ Name/Title: Paul Bickham/Manager Date: 04.06.2021

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

MBD 10 rev./effective 02/2016

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 3 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421

Company Name: Advanced Recreational Concepts Address: 3125 Skyway Cir. Melbourne, FL .32934

Federal ID: 20-0520823 Phone: 321-775-0600 Fax: _____ Email: info@arcflorida.com

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

[X] See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)

Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

[ ] No Subcontracting/consulting (of any kind) will be performed on this contract.

[ ] No Firms are listed to be utilized because: _____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=WMBE O =Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %
O 59-3136444	Playspace Services 3125 Skyway Cir Melbourne Fl 32901 info@playspaceservices.com	HF HM	909 912 914		

Total ALL Subcontract / Supplier Utilization $ _____

Total SLBE Utilization $ _____

Total WMBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. ____% Percent WMBE Utilization of Total Bid/Proposal Amt. ____%

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: _____ Name/Title: Paul Bickham/Manager Date: 04.06.2021

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

MBD 20 rev./effective 02/2016

City of Tampa – DMI Sub-(Contractors/Consultants/Suppliers) Payments [ ] Partial [X] Final

Contract No.: 21-C-00417 WO#,(if any)____ Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421
Contractor Name: Advanced Recreational Concepts Address 3125 Skyway Cir. Melbourne, FL .32934
Federal ID 20-0520823 Phone 321-775-0600 Fax _____ Email info@arcflorida.com
GC Pay Period _____ Payment Request/Invoice Number:_____ City Department: _____
Total Amount Requested for pay period:_____ Total Contract Amount(including change orders):_____

-Type of Ownership - (F=Female M=Male), BF BM = African Am., HF HM = Hispanic Am., AF AM = Asian Am., NF NM = Native Am., CF CM = Caucasian S = SLBE

Type Trade/Work Activity []Sub []Supplier Federal ID	Company Name Address Phone & Fax	Total Sub Contract Or PO Amount	Amount Paid To Date Amount Pending Previously Reported	Amount To Be Paid For This Period Sub Pay Period Ending Date
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$

Certification: I hereby certify that the above information is a true and accurate account of payments to sub – contractors/consultants on this contract.

Signed _____ Name/Title Paul Bickham / Manager Date: 04.06.2021

(Modifying This Form or Failure to Complete and Sign May Result in Non-Compliance)

DMI form 30 (rev. 03/12/10) Pg __ of __ [ ] See attached for additional information.

Labs

BIDDER'S AFFIDAVIT

Before me, the undersigned authority who is duly authorized by law to administer oaths and take acknowledgements, personally appeared

David A. Labs

AFFIANT'S NAME (PERSON'S NAME)

Who, after being duly cautioned and sworn, and being fully aware of the penalties of perjury, does hereby depose and declare, on his/her own behalf or as a representative on behalf of a partnership or corporation, or other entity that is the Bidder in the matter at hand, as follows:

1. That the Bidder, if a natural person, is of lawful age.

2. That if the Bidder is a partnership, or a corporation, or other legal person or entity recognized in the State of Florida, it has complied with all laws and ordinances governing the formation and continued existence of such entities, including but not limited to, if a Florida corporation, to the filing of its Articles of Incorporation with the Florida Secretary of State and if a corporation incorporated under the laws of a state other than Florida, that it is duly authorized to do business in the State of Florida; that it is currently an active corporation or entity fully authorized to do business; and that the undersigned is representative of the corporation or entity authorized to make this affirmation and declaration and who has the power to bind said corporation or entity.

3. That if the Bidder is operating under a fictitious name, Bidder has currently complied with and any and all laws and procedures governing the operation of businesses under fictitious names in the State of Florida;

4. That the Bidder has not submitted a rigged Bid, nor engaged in collusive bidding, or a collusive bidding arrangement, or fraudulent bidding, or entered into a conspiracy in connection with this bid with any other natural person, partnership, corporation or other entity making a bid for the same purpose. The Bidder has not entered into any understanding or agreement with any other person or entity where one or more such persons or entities agrees not to bid or fixing the prices to be bid.

5. In the event that the City determines that the Bidder has participated in any collusive, deceptive or fraudulent practices in derogation of the statements in this Affidavit the City, in addition to any other remedy it may exercise, will have the right to debar the Bidder. The contract let under such circumstances shall be deemed invalid.

6. That the Bidder is not in arrears to the City of Tampa upon debt or contract and is not in default, as surety or otherwise, of any obligation to the City, Hillsborough County or the State of Florida

7. That no officer or employee of the City, either individually or through any firm, corporation or business of which he/she is a stockholder or holds office, shall receive any substantial benefit or profit out of the contract or award to this Bidder; nor does the Bidder know of any City officer or employee having any financial interest in assisting the Bidder to obtain, or in any other way effecting, the award of the contract to this Bidder.

8. That, by submitting this bid, the Bidder certifies that he/she has fully read and understands the bid method and has full knowledge of the scope, nature, and quality of work to be performed or the services to be rendered.

9. That, by submitting this Bid, Affiant certifies compliance with Section 287.135, Florida Statutes and for contracts for goods or services of $1 million or more, that the Bidder is not on the Scrutinized Companies with Activities in the Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, and is not engaged in business operations in Cuba or Syria, and that for contracts for goods or services of any amount, that the Bidder is not on the Scrutinized Companies that Boycott Israel List, and is not engaged in a boycott of Israel. Affiant understands that pursuant to Section 287.135, Florida Statutes, the submission of a false certification may subject Bidder to civil penalties, attorney's fees, other costs and termination of any contract that is awarded.

The bid documents contain a General Conditions Section and may, in most cases, contain a Technical Specification Section. General Conditions contain general requirements and Technical Specifications detail the scope of the goods and/or services requested. The Technical Specifications shall always govern whenever there appears to be a conflict.

The Bidder shall comply with the applicable requirements of Federal and state laws, all Codes and Ordinances of the City of Tampa as amended from time to time and any applicable professional regulations.

FURTHER AFFIANT SAYETH NOT.

Bidder: Complete the applicable Acknowledgement for An Individual Acting In His/Her Own Right, A Partnership or A Corporation, according to your firm type.

FOR AN INDIVIDUAL ACTING IN HIS/HER OWN RIGHT

State of _____
County of _____

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization this _____ day of _____ 20____, by _____, who is personally known to me or who has produced identification and who did (did not) take an oath.

_____ Signature of Notary Public

_____ Signature of Affiant

Notary Public
State of: _____
My Commission
Expires: _____

_____ Printed, typed or stamped Commissioned name of notary public

_____ Printed or typed name of Affiant

FOR AN ENTITY

State of FL
County of Pinellas

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization this 5 day of May 2021, by David A. Lamb, as Mgr Partner, of Lamb Drainage & Flori Pave a ☐ Partnership, ☐ Joint Venture, ☐ Corporation, ☒ Limited Liability Company (LLC) or ☐ Other _____, on behalf of such entity. Such individual is personally known to me or has produced identification.

Type of identification produced: FL DL

_____ Signature of Notary Public

_____ Signature of Affiant

Notary Public
State of: FLORIDA
My Commission
Expires: APR 4 2025

DAVID W SEABROOKS
Notary Public - State of Florida
Commission # HH 113030
My Comm. Expires Apr 4, 2025

DAVID Seabrooks
Printed, typed or stamped Commissioned name of notary public

David A. Lamb
Printed or typed name of Affiant

BIDDER SUBMITTAL CHECKLIST
BID DOCUMENTS TO BE RETURNED

BID #: 31041421	
BID TITLE: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, AND INSTALLATION, REPAIRS AND REPLACEMENT	
THE FOLLOWING FORMS MUST BE INCLUDED IN BID PACKAGE PLEASE ACKNOWLEDGE BY ANSWERING "YES"	
	YES
Did you sign your bid? *	☒
Did you sign and complete MBD Forms 10 and 20? *	☒
Did you fully complete the price proposal /bid response page? *	☒
Did you complete the Bidder's Affidavit and associated notarized form? *	☒
If an addendum has been issued that changed the Bid Response Page(s), did you provide pricing on the pages marked "Addendum" *	☐
Did you include catalogs, price sheets and or CD's as indicated per Technical Specification? *	☒
Did you include copies of certificates and or licenses as indicated per Technical Specification? *	☒
Did you include pricing for Engineered Fiber Wood Mulch per Technical Specification? *	☐
Did you include Manufacture Specifications as per Technical Specification? *	☒
Did you List pricing based on thickness and color options per Section 11 of the Technical Specifications?*	☒
Is your company name clearly be indicated on the attached price sheet?*	☒

*** Failure to submit these forms shall result in your bid being deemed as "non-responsive".**

Requested Voluntary Information Regarding
Bidder's Initial Employment Application Content

The Bidder's own initial application for employment has criminal history screening practices similar in nature to the practices contained in Chapter 12, Article VI – Criminal History Screening Practices, City of Tampa Code of Ordinances. *(Responses, whether "Yes" or "No", are for informational purposes only and will not be used as a basis of award or denial, nor as a basis for any protest)*: [ ] Yes [X] No

Firm Name: Lab's Drainage & Plexi Pave

Authorized signature: _____ Date: 5-5-21

ATTACHMENT A - CONFLICT OF INTEREST DISCLOSURE FORM

For purposes of determining any possible conflict of interest, all bidders/proposers, must disclose if any elected or appointed officer of the City of Tampa, City of Tampa employee(s), or any immediate family member* or close personal relation** of an elected or appointed officer of the City of Tampa or City employee(s) is also an owner, corporate officer, agent, employee, stockholder, or has a controlling financial interest***, etc., of their business.

**Immediate family* means spouse, parents and children of the person involved.

***Close personal relationship* means dating, cohabitation, and/or having an intimate sexual relationship. Dating includes but is not limited to casual dating, serious dating, or casual sexual involvement where the parties have no intention of carrying on a long-term relationship, cohabitation, and any other conduct or behavior normally associated with romantic or sexual relationships. This definition applies regardless of the sexual orientation of the employees involved. Persons involved in a close personal relationship shall be referred to as a "close personal relation."

****Controlling financial interest* means ownership, directly or indirectly, to ten (10) percent or more of the outstanding capital stock in any corporation or a direct or indirect interest of ten (10) percent or more in a firm, partnership, or other business entity or such other interest or position in a business entity sufficient to allow him/her or her to control its operations.

Indicate either "yes" (a City employee, elected or appointed official is also associated with your business), or "no". If yes, give person(s) name(s) and position(s) with your business.

YES _____ NO X

NAME(S) / POSITION(S)

_____

_____

_____

_____

FIRM NAME: Laub's Drainage & Flexi Pave

BY (PRINTED NAME): David A. Laub

BY (SIGNATURE): [signature]

TITLE: My father

DATE: 5-5-21

BID RESPONSE FOR
SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT

Please Print or Type

We the undersigned, as Bidders, hereby declare that we have carefully read this proposal or bid and the provisions, terms and conditions concerning the equipment, materials, supplies or services as called for, and with full knowledge and understanding of the requirements and conditions, do hereby agree to furnish and to deliver as indicated, FOB, City Facility Location, with all transportation charges prepaid, and for the prices quoted thereon as follows.

I. **Site Furnishings and Playground Equipment**	**Catalog Name**	**Date**	**Discount**
a. Catalog			
b. Catalog			
C. Catalog			
d. Catalog			
e. Catalog			
f. Catalog			
If additional space is needed, attach additional pages using headings as indicated above			

2. Installation of Site Furnishings, Playground Equipment, Shelters, Shade Structures, Gazebos, and Trellises, Etc. To be based on a firm fixed percentage of the equipment cost (the total cost after discount has been taken, but before freight has been added).	The firm, fixed percentage is _____%
3. Is your written factory certification for the installation of playground equipment attached?	Yes No
4. If you are using a subcontractor for the installation of playground equipment list the Certified Installer's Company Name/s:	Name: _____
5. Does your company provide repair service?	Yes No $_____/hour
6. Engineered Wood Fiber Mulch (to include ground preparation and Geotextile separator installation) Is manufacturer's specification data sheet attached?	Yes No $_____ per Cu. Ft $_____ per Sq. Ft

7. Surfacing Products (Poured-In-Place Rubber, Artificial Turf, FlexiPave, Concrete and Brick Pavers) Is price table attached Is manufacturer's specification data sheet attached? Have samples been submitted?	(Yes) (Yes) Yes	No No (No)
8. Have you submitted catalog(s), CD(s) or printed price sheet(s) to be considered as part of this bid? Failure to submit may disqualify your bid.	Yes	No
9. Minimum order?	(Yes) If so, $ 500.00	No

10. List any Exclusions:

11. Contact Information:

Name: David A. Laub Phone: 727-939-2116

Cell: 727-423-3182 Email: dave@labslandscape.com

Firm Name: Laub's Drainage & Flexi Pave

Authorized Representative's Name: David A. Laub

Authorized Representative's Title: owner/my partner

Address: 504 Wideview Ave

City: Tarpon Springs State: FL Zip: 34689

Telephone No.: 727-939-2116 Fax No.: N/A Email: dave@LaubsDrainage&Flexi

Federal I.D. #: 85-1000805

Type Organization: [ ] Individual [ ] Small Business [ ] Non-Profit [X] LLC
[ ] Partnership [ ] Corporation [ ] Joint Venture

Business is licensed (unless exempt by applicable law), permitted and certified to do business in the State of Florida:
[✓] Yes [ ] No License #_____

Minority Business Status: [ ] Black [ ] Hispanic [ ] Woman [ ] Other

Is your business certified as a minority business with any government agency? [ ] Yes [✓] No. If yes, please list below:

Agency Name	Certification Number	Expiration Date

Sub-Contracting Submittals required: Forms MBD-10, MBD-20 must be submitted with the bid/proposal.

By signing this bid the Bidder complies with all of the requirements of the bid including but not limited to Communication Policy and City of Tampa Ethics Code contained in Section 4 of the GENERAL CONDITIONS.

Authorized Signature: _____ Date: 5-5-21

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules
City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)
(FORM MBD-10)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421
Company Name: Lobs Drainage & Paving Address: 504 Wilview Ave Tarpon Springs 34689
Federal ID: 85-1000805 Phone: 727-939-2116 Fax: N/A Email: dave@labsland504c.com

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.

[X] **No Firms were contacted or solicited for this contract.**
[ ] **No Firms were contacted because:** _____
[ ] **See attached list of additional Firms solicited and all supplemental information (List must comply to this form)**
Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=WMBE O = Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N

Failure to Complete, Sign and Submit this form with your Bid or Proposal Shall render the Bid Non-Responsive (Do Not Modify This Form)

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub–contracting opportunities on this contract.

Signed: _____ Name/Title: David A. Lobs Mgr Partner Date: 5-5-21

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive
Forms must be included with Bid / Proposal

MBD 10 rev./effective 02/2016

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 3 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421

Company Name: Lacks Drainage & Flexi Pave Address: 504 Wildview Ave Tarpon Springs 34689

Federal ID: 85-1000605 Phone: 727-939-2116 Fax: N/A Email: dlacks@lacksenterprises.com

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

[ ] See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)

Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

[X] No Subcontracting/consulting (of any kind) will be performed on this contract.

[ ] No Firms are listed to be utilized because: _____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=WMBE O =Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %

Failure to Complete, Sign and Submit this form with your Bid or Proposal Shall render the Bid Non-Responsive. (Do Not Modify This Form)

Total ALL Subcontract / Supplier Utilization $ _____

Total SLBE Utilization $ _____

Total WMBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. ____% Percent WMBE Utilization of Total Bid/Proposal Amt. ____%

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: _____ Name/Title: David A. Lacks Manager Date: 5-5-21

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

MBD 20 rev./effective 02/2016

City of Tampa – DMI Sub-(Contractors/Consultants/Suppliers) Payments [ ] Partial [ ] Final

Contract No.: 21-C-00417 WO#,(if any)_____ Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421
Contractor Name: _____ Address _____
Federal ID _____ Phone _____ Fax _____ Email _____
GC Pay Period _____ Payment Request/Invoice Number:_____ City Department: _____
Total Amount Requested for pay period:_____ Total Contract Amount(including change orders):_____

-Type of Ownership - (F=Female M=Male), BF BM = African Am., HF HM = Hispanic Am., AF AM = Asian Am., NF NM = Native Am., CF CM = Caucasian S = SLBE

Type Trade/Work Activity []Sub []Supplier Federal ID	Company Name Address Phone & Fax	Total Sub Contract Or PO Amount	Amount Paid To Date Amount Pending Previously Reported	Amount To Be Paid For This Period Sub Pay Period Ending Date
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$

Certification: I hereby certify that the above information is a true and accurate account of payments to sub – contractors/consultants on this contract.

Signed _____ Name/Title _____ Date: _____
(Modifying This Form or Failure to Complete and Sign May Result in Non-Compliance)

DMI form 30 (rev. 03/12/10) Pg __ of __ [ ] See attached for additional information.

ATTACHMENT B

	A	B	C
1		**ATTACHMENT B - PRODUCTS LIST**	
2	**PRODUCTS**	**TYPE**	**MANF. NAME**
3	Benches	**PLAYGROUND & FITNESS EQUIPMENT**	
4	Trash Receptacles	650.12, 650.18	Landscape Structures
5	Bike Racks	650.38, 650.54	Gametime
6	Bollards	650.60, 650.72	Kompan
7	Picnic Tables	650.60, 650.72	Berliner Seilfabrik
8	Bike Repair Station		
9	Play Equipment		
10	-Play Structure	**PLAY SURFACING -**	**MANUFACTURER** D
11	-Free Standing		GT Impax PIP
12	Safety Surfacing	650.5	Vitriturf PIP
13	-PIP		LS Pebble Flex
14	-Eng. Wood Fiber		Surface America PIP
15	-Play Turf		Fibar
16	Dog Waste Station		KorKat
17	Pavers		Forever Lawn
18	- brick		
19	- concrete		Innovative Sports Surfacing
20	Flexi Pave		
21	Shade Structure		
22	-fabric sails		
23	-hard roof	**SITE FURN:**	
24	Turf Support Mtls.		**MANUFACTURER**
25	Perma Trak		Du Mor
26		Comm Codes	Victor Stanley
27		650.06	Anova Furnishings, Inc.
28		650.1	Landscape Forms
29		650.24	Keystone Ridge Designs, Inc.
30		650.36	Kay Park
31		650.38	Belson Outdoors
32			Wabash Valley
33			The Park Catalog
34		120.27	Wausau Tile
35			Namco DoggyDo Station
36			iron Age Designs
37			Ironsmith, Inc.
38			Dura Art Stone
39			Creative Systems-Landscape Brands
40			Park Warehouse
41			mmcite7 LLC
42			Forms + Surfaces
43			
44		**SHADE STRUCTURES & GAZEBO**	
45			**MANUFACTURERS**

ATTACHMENT B

	A	B	C
46			Poligon
47			Shade Systems
48			Appollo Sunguard
49			USA Shade
50			Classic Recreation Systems
51			Tensile Shade Products
52			
53		**MISCELLANEOUS PRODUCTS / MATERIALS**	
54			**MANUFACTURERS**
55			PermaLoc
56			Grass Pave
57			FlexiPave
58			PermaTrak
59			Trex Company, Inc.
60			Geo Block
61			Oldcastle
62			Keystone
63			Pine Hall Brick
64			
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ATTACHMENT B

	D	E
1		
2	**DETAILS**	**DISCOUNT %**
3		
4	Play structures & Free Stdg. Pieces	
5	Play structures & Free Stdg. Pieces	
6	Play structures & Free Stdg. Pieces	
7	Play structures & Free Stdg. Pieces	
8		
9		
10	**ETAILS**	
11	Rubber & Engineered wood fiber	
12	Rubber Poured In Place (PIP)	10%
13	Rubber PIP	10%
14	Rubber PIP	10%
15	Eng. Wood Fiber / Rubber PIP	
16	Rubber PIP, Eng. Wood Fiber, Bonded Rubber, Rubber Mulch, Artificial	10%
17	Artificial Playground Turf	
18		
19	Rubber PIP, Artificial Turf, Court Surface Repair	10%
20		
21		
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45	**DETAILS**	

ATTACHMENT B

	D	E
46		
47		
48		
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51		
52		
53	**ETAILS**	
54		
55	Metal edging	
56	Turf support	
57	Alt. tree grate / paving	
58	Boardwalk system	
59	Decking	
60	Turf support	
61	Block walls	
62	Block walls	
63	Brick Pavers	
64		
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CERTIFICATE
of Completion

softroc

THIS CERTIFICATE IS PROUDLY PRESENTED FOR COMPLETION
OF THE SOFTROC INSTALLER TRAINING WORKSHOP TO :

Laub's Landscape, Drainage & Flexi Pave

Congratulations on your successful completion of the Softroc Installer Training Workshop. You now have the knowledge and tools to successfully install Softroc Rubber Safety Surfacing.

Presented by Barry Meakings, Softroc Founder.

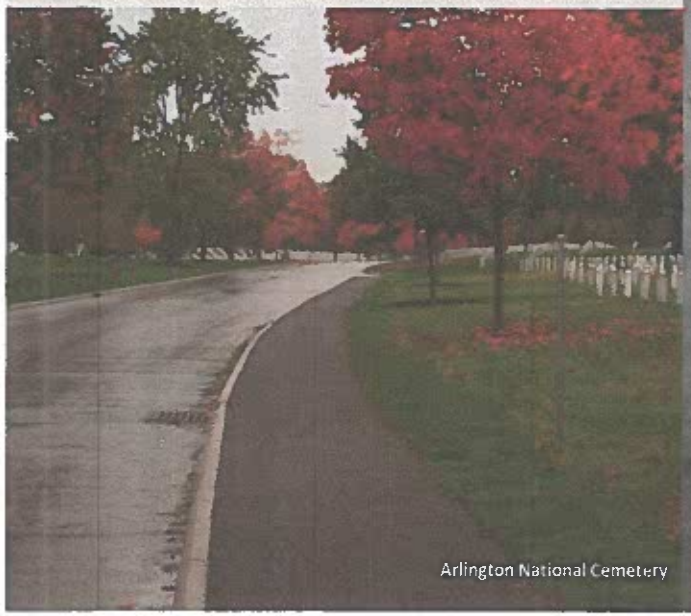
February 7, 2020

Barry

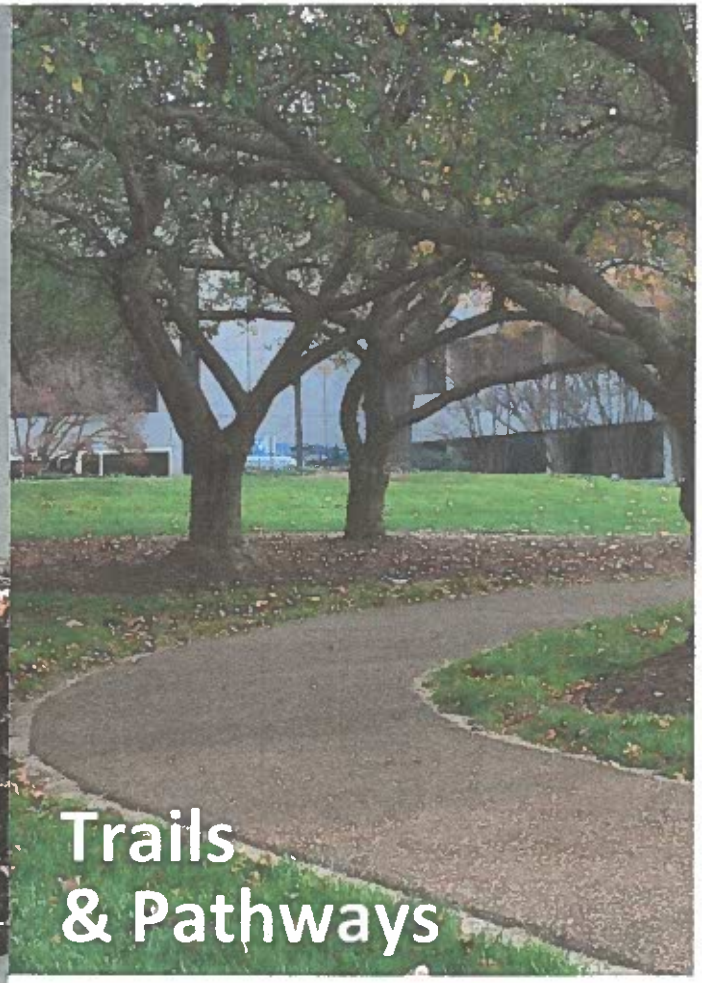

KBI
AUTHORIZED
KBI FLEXI-PAVE
CERTIFIED INSTALLER
Presented to:
Laub's Landscape
On this
21st day of April, 2015
KBI Certification No.
FLCI-231

Trails are an increasingly popular amenity, providing multi-use recreation for everyone. More people are turning to running, jogging, walking and biking for exercise and transportation—recognizing both economic and health benefits of utilizing local trails. As a state-of-the-art paving solution KBI Flexi-Pave offers many benefits including:

- **Reduces long-term maintenance and liability costs**
- **Porous,flexible and non-cracking paving system**
- **Provides a non-slip surface**
- **Tested and proven with hundreds of applications across North America including Yellowstone National Park and Arlington National Cemetery**
- **LEED certified and ADA compliant**







KBI Flexi®-Pave has revolutionized trail surfacing by providing a superior trail system that benefitsthe environment, and reduces long-term maintenance costs and liability risks. Our porous paving systems can be installed without the need for specialized heavy duty equipment, reducing the impact to the surrounding environment.

KBI Flexi®-Pave

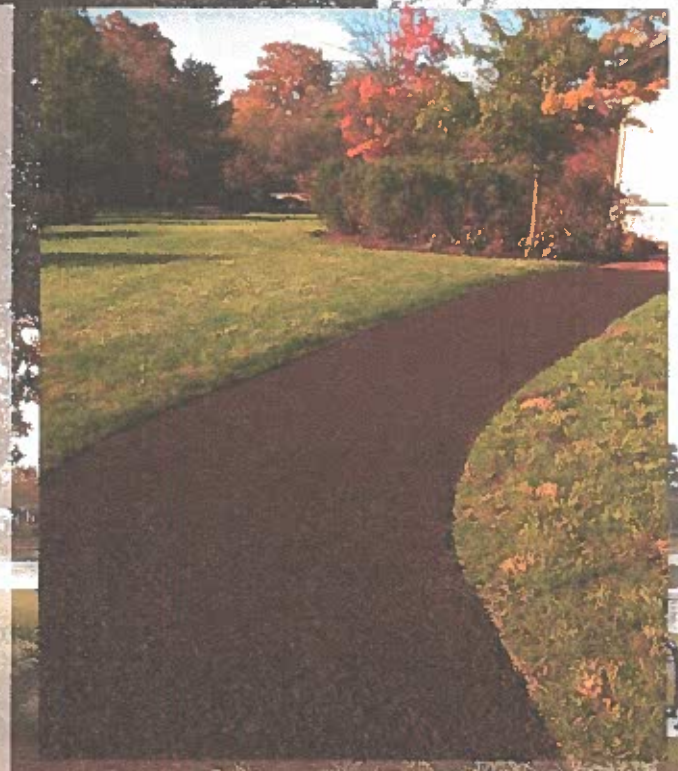
KBI Flexi-Pave is an effective porous paving solution that offers many advantages when compared to traditional dirt, stone, dust, concrete or asphalt paths and trails. KBI Flexi-Pave is comprised of three component parts—granulated wire-free recycled tires, rock aggregate and KBI's proprietary binding agent.

KBI Flexi-Pave is excellent for steep grades, providing a non-slip surface to main pathways as well as other trail enhancement areas such as fitness areas and bike storage areas.

POROUS – It solves drainage problems, eliminates standing water and provides positive groundwater recharge. With up to a 20% void space KBI Flexi-Pave percolates at 3000 gallons per square foot per hour.

AESTHETICS – Create an aesthetically pleasing path from five appealing earth tone colors that

DURABLE – KBI Flexi-Pave acts as a pressure relief valve avoiding problems associated with heave and hydrostatic pressure. During periods of high ground water or a flood event, KBI Flexi-Pave "flexes" with the pressure and provides a monolithic expansion joint.





blend in with the surroundings and users will also appreciate the comfort of running, jogging and walking on the KBI Flexi-Pave surface.

KBI Flexi-Pave also meets and exceeds ADA compliance with a 0.65 coefficient of friction rating.

MAINTENANCE – KBI Flexi-Pave is flexible, self-cleaning and virtually maintenance free. Maintenance contracts are available to keep your KBI Flexi-Pave path looking in pristine condition.

To learn more about how KBI Flexi-Pave can improve your facilities, call (727) 723-3300 to speak to a KBI product specialist and schedule a presentation or arrange a site visit. You can also visit us at our website. www.kbiglobal.com



SPECIFICATIONS

SUSTAINABLE INFRASRUCTURE SOLUTIONS

Creating

"Smarter Materials for Next Generation Infrastructure"

KBI Flexi®-Pave HD2000

SPECIFICATIONS for Flexible Porous Paving (Revised 19th August 2020)

1. GENERAL

1.1 Abstract

Pervious pavement system is now being recognized as a best management practice by the Environmental Protection Agency and the state of Florida. The pervious pavements systems are designed to have enhanced pore size in surface layer comparted to conventional pavements types, encouraging flow of water through the material. The advantages include reducing the volume of surface runoff; reduce need for stormwater infrastructure, less land acquisition for stormwater ponds, improved road safety by reducing surface ponding and glare, and a reduced urban heat island effect. The research project investigated the infiltration rates, rejuvenation techniques, sustainable storage of components and complete systems, water quality, and the strength properties of porous asphalt pavements. The work was conducted at the field labs of stormwater Management Academy at UCF." Form DOT F 1700.7 (8-72) *<14*

KBI Flexi®-Pave leachate contains no organic compounds or heavy metals but does have elemental constituents all with concentrations less than 2.52 ppb. These values are far below primary and secondary drinking water standards, thus demonstrating KBI Flexi®-Pave's leachate does not pose a threat to environmental quality of the watershed above the intake (or the aquifer around the well) and thus the drinking water resources. ASTM RE1252 <15

1.2 Introduction

Growth urbanization has a negative impact on the quantity and quality of runoff water entering our lakes and streams. *<8* By replacing natural land covers (like grasslands and forests) with impervious surfaces (like parking lots and streets), we lose the water retaining role of the soil and vegetation.

Increased runoff from impervious surfaces causes dangerous floods, severe erosion damage to our stream channels, diminished recharge of groundwater, and degraded habitat for our fisheries. These same impervious surfaces can transport the many pollutants deposited in urban areas, such as nutrients, sediment, bacteria, pesticides, and chloride. In the worst cases, the amount of pollutants in urban runoff are high enough to prevent us from being able to swim or fish in our local waters.

1.3 Background

KBI's KBI Flexi®-Pave solutions have been successfully used for more than 20 years in a variety of climates around the United States, Carribean, and Europe.

Providing a pavement surface that is also part of the stormwater management system, reducing stormwater runoff, pollutants, and replenishing groundwater.

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Installations of KBI Flexi®-Pave in parking lots, and trails and have lasted more than 20 years with no maintenance other than cleaning. A few of the signature projects are; Yellowstone National Park, Arlington National Cemetery, Pebble Beach, Key West, Smithsonian Instiute.

1.4 Applications

Some Examples of the the most common uses of KBI Flexi®-Pave are:

Trails,Tree surrounds, Parking Lots, Sidewalks, Driveways, Fitness Trails, Equstrian, Roadside, Road Way Medians, Shallow Drainage, Embankment Stabilization. ,Mujlti Recreational, etc.

1.5 Storm Water Run Off

The KBI Flexi®-Pave allows for the release of Hydraulic Water pressures releasing through the 23% dynamic porous design at a porosity rate of 3000+ gallons per square foot per hour *<3.*

By controlling the runoff at the source, such as a parking lot, KBI Flexi®-Pave reduces the need for or the required size of a regional BMP, such as a wet detention pond, which saves money, and can allow increase in the development scope of works.

KBI Flexi®-Pave helps reestablish a more natural hydrologic balance and reduce runoff volume by trapping and slowly releasing precipitation into the ground instead of allowing it to flow into storm drains and out to receiving waters as effluent.

This same process also reduces the peak rates of discharge by preventing large, fast pulses of precipitation through the stormwater system with the 23% void capacity.

Provides drainage and evacuation of accumulative water through the natural porosity of the Flexi®-Pave system. *<4*

The KBI Flexi®-Pave can also solve multiple environmental struggles; Sound Abatement Solutions, Environmental Pollution, Storm Water Runoff and can be used as Retaining walls.

1.6 Sound Abatement

Acoustical properties were assessed according to ASTM C423. The data obtained show porous absorbers having a high sound absorption performance with low thicknesses and compared to some of the current models for the prediction of their absorptive properties.

1.7 Environmental Infrastucure

Pollution: KBI Flexi®-Pave naturally incubates a "Bio - Film Bacteria" within the pore space of the structure which can remove up to 86% of dissolved Nitrates and Ortho- Phosphorous. *2*
(Thereby reducing the concentration of nutrient pollutants as it passively cleans the water through the KBI Flexi®-Pave)

Cools stormwater temperature during summertime before discharge and mitigates heat island effects. *<9*

Recharging of groundwater supplies. *<10*

Low impact development and cost-effective technology for stormwater management, by reducing need for drainage structures and rights of way. *<11*

Improves water and oxygen transfer to nearby plant roots. <13

Determining the void capacity and silt load recoverability of the material. Measuring the rate of water "upstream" of the sample install. Determining the recoverability after the embedment of soil. KBI Flexi®-Pave showed a superior void capacity. The material also showed extremely high recoverability after vacuuming. <19 ERIK Infiltration Testing

Water Storage, KBI Flexi®-Pave catches precipitation and surface runoff, storing it in the natural water vault that exists within the KBI Flexi®-Pave (Approx 0.6 of a gallon / square foot) while slowly allowing it to infiltrate into the soil below.

Water Conservation, Determining the materials effect on water quality, specifically in the reduction in Disolved Nitrates and Ortho- Phosphorous concentrations. The material was tested using an enclosed capture well system that isolated the spiked water samples from intrusion by other water sources, this isolated the KBI Flexi®-Pave system, thus maximizing it as the major contributor to the test results.

Testing indicated that KBI Flexi®-Pave is effective in reducing Dissolved Nitrates and Ortho-Phosphorous loads to groundwater. <28 EPA 353.2 / EPA 365.4.

1.8 Testing

KBI Flexi®-Pave - components of this priority porous design consists of wire and fiber free different particle sizes repurposed tires, fractured face granite rock mixed with different proportions of custom binding agent. Priority procedure and formula. *<5*

Reduce Road Salt, another benefit of Flexi Pave™ is the reduced need to apply road salt for deicing in the wintertime. Researchers at the University of New Hampshire have observed the permeable surface only needs 0 to 25% of the salt routinely applied to normal asphalt. <6

Promotes Thawing, Other researchers have found that the air trapped in the pavement can store heat and release it to the surface, promoting the melting and thawing of snow and ice. <7 Hydrologic Performance

Permeability is tested through trials of varying conditions. KBI Flexi®-Pave exhibited a high degree of permeability in accordance with FL Dot requirements. <20 FL DOT FM 5-565 Permeability Testing

Slip Resistance, Determining the materials classification as a slip resistant walking surface. Testing the coefficient of friction to the surface with human locomotion. KBI Flexi®-Pave was determined to be a non-slip hazard surface. <26ASTM D 2047

Sustainable, ADA compliant and slip resistant with a 0.65 coefficient or friction rating. Flexi Pave™ is a LEED qualified construction material meeting 7 of 7 LEED Categories, providing up to 11 points.

published research describing the relationship between the magnitude and duration of impact accelerations and the risk of head trauma). KBI Flexi®-Safe was found to absorb sound at varying frequencies. <18 ASTM C423-09a and E795-05.

Reference

<1 Riverbank Acoustical Laboratories Sound Absorption Test RAL™-A10-119 conducted: 29 June 2010

<2 Mallard, Inc. Water sampling City of Dunedin Municipal Service Facility conducted:13 January 2011

<3 Constellation Technology Flexi Pave™ Perk Test conducted: 9 February 2015

<4 Constellation Technology Flexi Pave™ Compression and Leach Test report conducted 9 April 2015

<5 KBI FLEXI® Leeds Credits: SS credit 6 – stormwater management MR Credit 4 – Recycled Content

<6 Houle, K., Roseen, R., Ballestero, T., Briggs, J., and Houle, J., 2009, Examinations of Pervious Concrete and Porous Asphalt Pavements Performance for Stormwater Management in Northern Climates: World Environmental and Water Resources Congress 2009: p. 1–18.

<7 Roseen, R., Ballestero, T., Houle, J., Briggs, J., and Houle, K., 2012, Water Quality and Hydrologic Performance of a Porous Asphalt Pavement as a Storm-Water Treatment Strategy in a Cold Climate: Journal of Environmental Engineering, vol. 138, no. 1, p. 81–89.

<8 Davis, A.P., 2005, Green engineering principles promote low-impact development: Environmental Science and Technology, A-pages, v. 39, no. 16, p. 338A–344A.

<9 Lebens, M. (2012). Porous Asphalt Pavement Performance in Cold Regions. Report 2012-12. Minnesota Department of Transportation. St. Paul, Minn. Available online at www.dot.state.mn.us/research/documents/201212.pdf

<10 UNHSC (2011). Regular Inspection and Maintenance Guidance for Porous Pavements. University of New Hampshire Stormwater Center, Durham, N.H. Available online at www.unh.edu/unhsc/sites/unh.edu.unhsc/files/UNHSC%

<11 UNHSC (2011). Regular Inspection and Maintenance Guidance for Porous Pavements. University of New Hampshire Stormwater Center, Durham, N.H. Available online at www.unh.edu/unhsc/sites/unh.edu.unhsc/files/UNHSC%

<12 Houle, J.J., R.M. Roseen, T.P. Ballestero, T.A. Puls, & J. Sherrard Jr. (2013). Comparison of Maintenance Cost, Labor Demands, and System Performance for LID and Conventional Stormwater Management. Journal of Environmental Engineering, Vol. 139, No. 7, pp. 932–938. DOI: 10.1061/(ASCE)EE.1943-7870.0000698

<13 CTC & Associates Inc. (2012). Porous Asphalt Performance in Cold Regions. Report 2012-12TS. Minnesota Department of Transportation, St. Paul, Minn. Available online at www.dot.state.mn.us/research/TS/2012/201212TS.pdf

<14 dot-bdk78-977-01-2-rpt FDOT Project Number: BDK78; Work Order #977-01 UCF Office of Research

<15 ASTEM E1252 Testing of leachate off of KBI Flexi ®-Pave Material was tested to determine total solids and analysis of the solids for chemical identification.

<16 ASTM C 666/C/666M-03 Material will be tested in multiple Freeze/Thaw cycles. Goal of test is to have no cracks, breaks or deterioration through 200 cycles of Freeze/Thaw.

<17 ASTM G57-06. The material was tested in and out of water to determine its electrical resistance capabilities. KBI Flexi®-Pave was show to be resistant to electricity.

<18 ASTM C423-09a and E795-05. Determining the materials sound absorption capabilities.

<19 ERIK Infiltration Testing. KBI Flexi®-Pave showed a superior void capacity. The material also showed extremely high

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recoverability after vacuuming

<20 FL DOT FM 5-565 Permeability Testing, KBI Flexi®-Pave exhibited a high degree of permeability.

<21 ASTM E84-11a KBI Flexi®-Pave had a flame spread index of 15 and a smoke developed index of 300.

<23 TX DOT 242-F. Hamburg Loaded Wheel Test

<24 ISSA TB 100, W et Track Abrasion / ISSA T B 139, Cohesion Measurement

<25 ASTM D 4123. Determining the impact of Heat Aging on the resilient modulus of a materials core.

<26ASTM D 2047 Determining the materials classification as a slip resistant walking surface.

<27 TX DOT 231-F. Determining the resiliency and recovery properties of the material by placing and removing loads.

<28 EPA 353.2 / EPA 365.4. Determining the materials effect on water quality, specifically in the reduction in nitrate and phosphorous concentrations.

SPECIFICATIONS

2. SPECIFICATION of KBI Flexi®- Pave HD2000

2.1 The Flexible Porous Paving shall be KBI Flexi®-Pave HD2000 made from recycled passenger tires, crushed stone and a urethane binding agent as manufactured by K.B. Industries, Inc. (KBI), 4600 140th Ave. N, Suite 200, Clearwater, FL 33762. Tel 727 723 3300

2.2 All components, materials and compounds shall be 100% sourced and manufactured in the USA. The Flexible Porous Paving shall be supplied by a manufacturer with at least 10 years experience that can supply references for similar applications and installations in the USA.

2.3 Submittals

2.3.1 Certificates stating that materials meet or exceed the specified contract requirements. Site handling and storage instructions.
2.3.2 Mixing and installation instructions.
2.3.3 A sample that reflects the characteristics of the material to be installed. The sample, upon approval, shall be maintained as the standard of minimum quality for all the proposed surfacing and paving work required for the project.

3. CONTRACTOR

3.1 The Contractor's craftsmen or crew chief, installing the KBI Flexi®-Pave Porous Paving shall attend a training webinar and an on-site installation training certification prior to installing KBI Flexi-Pave HD2000.
3.2 Contractors bidding on the installation of KBI Flexi®-Pave HD2000 may start the training process by contacting KBI and attending a training webinar prior to contract award. On-site installation training may occur after the contract is awarded.
3.3 The Contractor shall;
Furnish all labor, materials, tools, equipment, and incidentals required to install KBI Flexi®-Pave HD2000.
3.4 Provide an adequate number of skilled workers who are trained and experienced with installing KBI Flexi-Pave HD2000 and are familiar with the specified contract requirements and the methods needed for its installation.

3.5 Install the crushed stone sub-base as described in the specifications and shown on the contract drawing unless the sub-base is installed/provided.

3.5.1 Flexible Porous Paving at 2" (50mm) thick base requirement 4" (100 mm) thick. "Heavy traffic"

3.5.2 Flexible Porous Paving at 1½" (35mm) thick base requirement 4" (100 mm) thick. "Pedestrian traffic"

3.5.3 Flexible Porous Paving at 1" (25mm) thick base requirement to be an existing engineered base (Concrete, Asphalt, or Wooden) "Over Pour Conditions"

3.5.4 Maintain subgrade during construction to the maximum extent practical. regrade subgrade disturbed by delivery vehicles or other construction traffic, as needed.

3.6 Install the KBI Flexi®-Pave HD2000 to depth and width as described in the specifications and shown in the contract drawings.

3.7 Reduce the risk of damage to the KBI Flexi®-Pave surface by not allowing track vehicles (metal or rubber), forklifts (warehouse-variable reach), main lifts (booms or scissors), and/or dumpsters or roll-off containers on the KBI Flexi-Pave HD 2000 either during or following installation. Any explicit or implied warranty is voided through failure to comply with this section.

4. PRODUCTS

4.1 The KBI Flexi®-Pave HD2000 shall be installed in accordance with the manufacturers written instructions to an average depth of 1.5 inches over the prepared sub-base.

4.2 The KBI Flexi-Pave HD2000 shall be Natural colors; Black / Cypress / Redwood / Bark Brown / Green / Granite or ZX vibrant colors Brick Red / Concrete / Emerald / Mahogany / Olive Brown / Pitch Black / Sand Stone / Sky Blue / Slate in color.

4.3 The KBI Flexi-Pave HD2000 shall be mixed with a urethane binding agent based on MDI Polyether Polyols and shall be free of extender oils to prevent leaching over time. Binders that use extender oils will not be acceptable.

The KBI Flexi®-Pave HD2000 shall be cured and fit for use within 24 hours of installation.

4.3.1. Cure Time RuleExceptions to 4.3:

(a) 24 hours when installed in 45°F - 95 °F conditions

(b) 48 hours during very cold temperatures at or near freezing conditions.

(c) 72 hours when installed in subzero conditions. and not until the porous paving is accepted

Note: In all cases it is important that the hardness of the KBI Flexi-Pave be verified by the KBI Certified contractor before use

4.4 The KBI Flexi®-Pave HD2000 shall have a composition of 50% stone aggregate and 50% chipped rubber tires by weight.

5. TESTING REQUIRMENTS (And In accordance with the KBI Testing Portfolio Referenced)

The Contractor is responsible for supplying and installing a warranted material that meets, or exceeds, the manufacturer's specifications and testing:

5.1 ASTM C 666/C/666M- Freeze-Thaw testing with no cracks or breaks through 300 cycles of testing.

5.2 Designated as "Highly Permeable" under FL DOT FM 5-565 permeability testing.

5.3 Independent testing showing a perk rate of 2400 gph (40 gpm) per sq. ft. or higher.

5.4 Accelerated Weathering using ASTM 4798.

5.5 Hamburg Loaded Wheel Testing TX DOT 242-F, must be equivalent or better than 2.3 rut depth at 8,000 cycles and full recovery within 24 hours.

5.6 Static Creep Testing TX DOT 231-F, shall be equivalent to or better than total strain +2.703% and permanent strain equal to 0.514%.

5.7 Resilient Modulus Testing in accordance with ASTM D 4123 shall be equivalent or better than 68,495 pounds.

5.8 Slip resistant and ADA compliant, in accordance with ASTM D 2047 testing.

5.9 Heat resilient to 400 degrees in accordance with ASTM D 4123 testing.

5.10 Sound absorbent, in accordance with ASTN C423-09a / E795-05 testing.
5.11 Compression tested and be able to withstand 250 psi without permanent deformation or damage.
5.12 Has a leachate less than 6 parts per billion and containing no organic compounds or heavy metals.
5.13 The material shall be resistant to the following elements: transmission, hydraulic, and brake fluids, gasoline, diesel, saltwater, oil, chlorine, ozone, bromine, and muriatic acid.

6. PROJECT CONDITIONS

6.1 The Contractor shall provide appropriate and adequate protection to adjacent areas including but not limited to:
6.2 Protection of adjacent work space from splashing of Flexible Porous Paving materials.
6.3 Remove all stains from exposed surfaces of paving, structures, and grounds.
6.4 Remove all waste and spillage.
6.5 Provide suitable protection to assure no damage or disturbance to existing improvements or vegetation before starting work and maintain protection throughout the course of the work.
6.6 Restore and repair areas, at no additional cost to the owner, that have been damaged as a result of construction work, including existing paving on or adjacent to the site, to their original condition or repair as directed to the satisfaction of the Owner's Representative.

7. WEATHER

7.1 KBI Flexi®-Pave HD2000 urethane binder is engineered based on the geographical location of the project and climate expectations during installation. KBI will provide the appropriate binder for each installation and the materials delivered will be based on project location and seasonality.
7.2 KBI Flexi®-Pave HD2000 shall not be installed when the ambient air temperature in the shade near the installation site is above 95° F or below 32° F. Temperatures below 50° F can extend the curing time and would fall outside of normal "use ready in 24 hours" guidelines.
7.2.1 Exceptions to 7.2 :
KBI Flexi®-Pave HD2000 can be installed in 45°F to Subzero and temperatures, and over 95 °F BUT should be evidenced by the manufactuerer that the certified installer carries the extended certification from the manufacturer to carry out this exception to rule 7.2
7.3 The urethane binder shall be stored on site at between 40°- 77° F and used within 12 months of delivery.
7.4 The Contractor shall not pave on days when rain or snow is forecast, unless a change in the weather results in favorable paving conditions as determined by the Owner's Representative.

7.5 In the event of rain on days prior to installation, the sub base must be dry and not contain any standing or moving water.

8. SAFETY AND TRAFFIC CONTROL

When construction work will interfere with existing, traffic and sidewalks the Contractor shall notify and cooperate with local authorities, and other jurisdictional organizations, and provide temporary barriers, signs, warning lights, flaggers, and other protections as required by the authorities to assure the safety of pedestrians and vehicles around the construction area and to organize the smooth flow of traffic.

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9. MAINTENANCE

9.1 KBI Flexi®-Pave HD 2000 installations are designed to operate and function trouble free with only minimal routine maintenance over the lifetime of the product.

9.2 The frequency and scope of the routine maintenance required will largely be dependent on the application and project location. The key objective will be to keep the surface clean and clear of debris to maintain the hydraulic conveyance capacity of KBI Flexi®-Pave over time as well as maintaining the aesthetic appeal of the surface.

9.3 Prior to undertaking routine maintenance of KBI Flexi- Pave it is recommended that an annual inspection be completed to evaluate the condition of the surface. The following are suggested annual maintenance inspection points:

9.3.1 Inspect the surface of the KBI Flexi®-Pave for evidence of sediment deposition, organic debris, staining or ponding. If any signs of clogging are noted, schedule a vacuum sweeper (no brooms or water spray) to remove deposited material. Cleaned sections may then be tested by pouring water from a five-gallon bucket to ensure full hydraulic conveyance capacity has been restored.

9.3.2 Inspect the structural integrity of the KBI Flexi®-Pave surface, looking for signs of damage or surface deterioration, such as raveling, slumping, cracking, etc. Replace or repair affected areas, as necessary.

9.3.3 Check for potential need to overspray/roll with urethane binder after 4-6 years.

9.3.4 If in doubt or should any unexpected situations or observations occur during the maintenance inspection, please contact KBI for consultation and advice

10. WARRANTY

10.1 The KBI Flexi- Pave HD2000 shall have a material warranty of 1 year from the date of installation (extended warranties are available with the addition of a maintenance program)

10.2 The Manufacturers' warranty shall be issued on completion of the installation and final inspection.

10.3 The Manufactures' warranty can only issued when the installation has been completed by a KBI Flexi®-Pave Certified Contractor or a direct KBI Corprorate Crew. Faulty workmanship by tradesmen will be cause to void the warranty.

SPECIFICATIONS

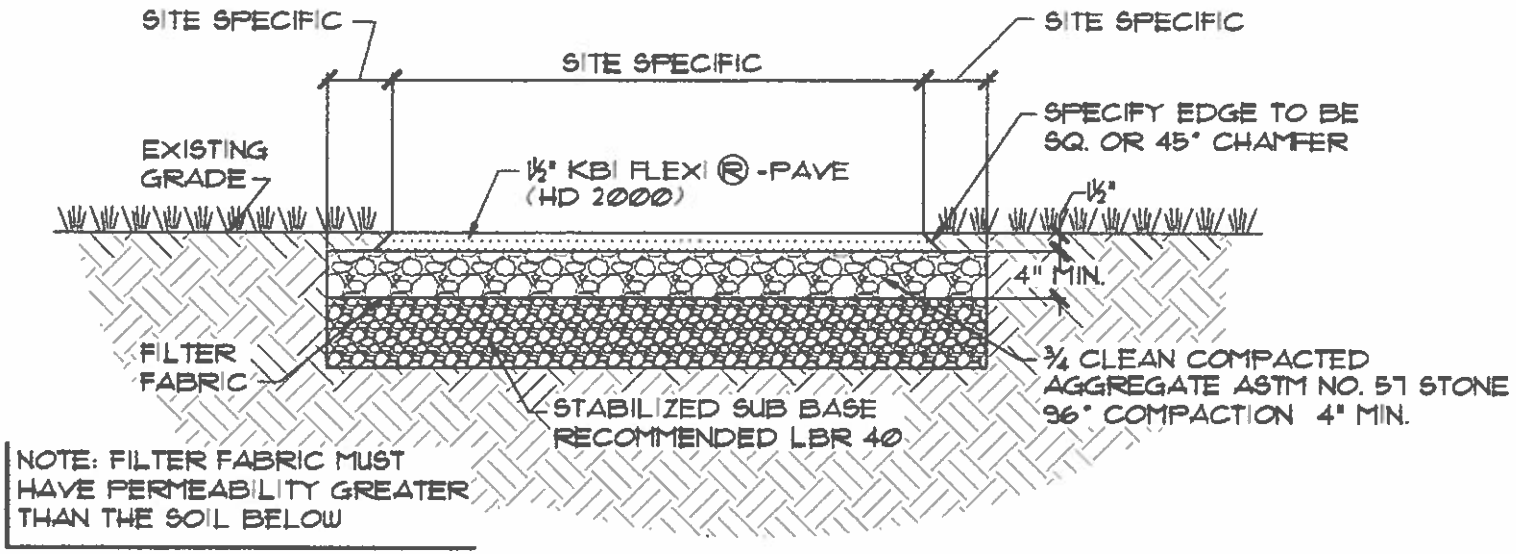
SUSTAINABLE INFRASRUCTURE SOLUTIONS

Creating

"Smarter Materials for Next Generation Infrastructure"

KBI FLEXI ® PAVE

SCALE-3/4"=1'-0"



K.B. Industries, Inc.

7300 Brian Dairy Rd, Ste 400, Largo, FL 33777

(727) 723-3300 • www.kbiglobal.com

DRAWN BY- TJG
DATE 10/22/14
SCALE 3/4"=1'-0"

Blue

BIDDER'S AFFIDAVIT

Before me, the undersigned authority who is duly authorized by law to administer oaths and take acknowledgements, personally appeared

_____
AFFIANT'S NAME

Who, after being duly cautioned and sworn, and being fully aware of the penalties of perjury, does hereby depose and declare, on his own behalf or as a representative on behalf of a partnership or corporation, or other entity that is the Bidder in the matter at hand, as follows:

1. That the Bidder, if a natural person, is of lawful age.

2. That if the Bidder is a partnership, or a corporation, or other legal person or entity recognized in the State of Florida, it has complied with all laws and ordinances governing the formation and continued existence of such entities, including but not limited to, if a Florida corporation, to the filing of its Articles of Incorporation with the Florida Secretary of State and if a corporation incorporated under the laws of a state other than Florida, that it is duly authorized to do business in the State of Florida; that it is currently an active corporation or entity fully authorized to do business; and that the undersigned is representative of the corporation or entity authorized to make this affirmation and declaration and who has the power to bind said corporation or entity.

3. That if the Bidder is operating under a fictitious name, Bidder has currently complied with and any and all laws and procedures governing the operation of businesses under fictitious names in the State of Florida;

4. That the Bidder has not submitted a rigged Bid, nor engaged in collusive bidding, or a collusive bidding arrangement, or fraudulent bidding, or entered into a conspiracy in connection with this bid with any other natural person, partnership, corporation or other entity making a bid for the same purpose. The Bidder has not entered into any understanding or agreement with any other person or entity where one or more such persons or entities agrees not to bid or fixing the prices to be bid.

5. In the event that the City determines that the Bidder has participated in any collusive, deceptive or fraudulent practices in derogation of the statements in this Affidavit the City, in addition to any other remedy it may exercise, will have the right to debar the Bidder. The contract let under such circumstances shall be deemed invalid.

6. That the Bidder is not in arrears to the City of Tampa upon debt or contract and is not in default, as surety or otherwise, of any obligation to the City, Hillsborough County or the State of Florida

7. That no officer or employee of the City, either individually or through any firm, corporation or business of which he/she is a stockholder or holds office, shall receive any substantial benefit or profit out of the contract or award to this Bidder; nor does the Bidder know of any City officer or employee having any financial interest in assisting the Bidder to obtain, or in any other way effecting, the award of the contract to this Bidder.

8. That, by submitting this bid, the Bidder certifies that he/she has fully read and understands the bid method and has full knowledge of the scope, nature, and quality of work to be performed or the services to be rendered.

9. That, by submitting this Bid, Affiant certifies compliance with Section 287.135, Florida Statutes and for contracts for goods or services of $1 million or more, that the Bidder is not on the Scrutinized Companies with Activities in the Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, and is not engaged in business operations in Cuba or Syria, and that for contracts for goods or services of any amount, that the Bidder is not on the Scrutinized Companies that Boycott Israel List, and is not engaged in a boycott of Israel. Affiant understands that pursuant to Section 287.135, Florida Statutes, the submission of a false certification may subject Bidder to civil penalties, attorney's fees, other costs and termination of any contract that is awarded.

The bid documents contain a General Conditions Section and may, in most cases, contain a Technical Specification Section. General Conditions contain general requirements and Technical Specifications detail the scope of the goods and/or services requested. The Technical Specifications shall always govern whenever there appears to be a conflict.

The Bidder shall comply with the applicable requirements of Federal and state laws, all Codes and Ordinances of the City of Tampa as amended from time to time and any applicable professional regulations.

FURTHER AFFIANT SAYETH NOT.
Bidder: Complete the applicable Acknowledgement for An Individual Acting In His/Her Own Right, A Partnership or A Corporation, according to your firm type.

FOR AN INDIVIDUAL ACTING IN HIS/HER OWN RIGHT

State of _____
County of _____

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization this _____ day of _____ 20____, by _____, who is personally known to me or who has produced identification and who did (did not) take an oath.

_____
Signature of Notary Public

_____
Signature of Affiant

Notary Public
State of: _____
My Commission
Expires: _____

_____
Printed, typed or stamped
Commissioned name of notary public

_____
Printed or typed name of Affiant

FOR AN ENTITY

State of Georgia
County of Douglas

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or ☐ online notarization this 19 day of April 2021, by Gregg Bliss, as President, of Bliss Products and Services, Inc. a ☐ Partnership, ☐ Joint Venture, ☒ Corporation, ☐ Limited Liability Company (LLC) or ☐ Other _____, on behalf of such entity. Such individual is personally known to me or has produced identification.

Type of identification produced: personally known

Allison McClesky
Signature of Notary Public

Signature of Affiant

Notary Public
State of: Georgia
My Commission
Expires: 3/14/2023

ALLISON C MCCLESKY NOTARY PUBLIC CARROLL COUNTY, GA MY COMMISSION EXPIRES MARCH 14, 2023

Allison McClesky
Printed, typed or stamped
Commissioned name of notary public

Gregg Bliss
Printed or typed name of Affiant

BIDDER SUBMITTAL CHECKLIST
BID DOCUMENTS TO BE RETURNED

BID #: 31041421	
BID TITLE: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, AND INSTALLATION, REPAIRS AND REPLACEMENT	
THE FOLLOWING FORMS MUST BE INCLUDED IN BID PACKAGE PLEASE ACKNOWLEDGE BY ANSWERING "YES"	
	YES
Did you sign your bid? *	
Did you sign and complete MBD Forms 10 and 20? *	
Did you fully complete the price proposal /bid response page? *	
Did you complete the Bidder's Affidavit and associated notarized form? *	
If an addendum has been issued that changed the Bid Response Page(s), did you provide pricing on the pages marked "Addendum" *	
Did you include catalogs, price sheets and or CD's as indicated per Technical Specification? *	
Did you include copies of certificates and or licenses as indicated per Technical Specification? *	
Did you include pricing for Engineered Fiber Wood Mulch per Technical Specification? *	
Did you include Manufacture Specifications as per Technical Specification? *	
Did you List pricing based on thickness and color options per Section 11 of the Technical Specifications?*	
Is your company name clearly be indicated on the attached price sheet?*	

*** Failure to submit these forms shall result in your bid being deemed as "non-responsive".**

Requested Voluntary Information Regarding
Bidder's Initial Employment Application Content

The Bidder's own initial application for employment has criminal history screening practices similar in nature to the practices contained in Chapter 12, Article VI – Criminal History Screening Practices, City of Tampa Code of Ordinances. *(Responses, whether "Yes" or "No", are for informational purposes only and will not be used as a basis of award or denial, nor as a basis for any protest)*: [_] Yes [_] No

Firm Name: Bliss Products and Services, Inc.

Authorized signature: _____ Date: 4/19/2021

ATTACHMENT A - CONFLICT OF INTEREST DISCLOSURE FORM

For purposes of determining any possible conflict of interest, all bidders/proposers, must disclose if any elected or appointed officer of the City of Tampa, City of Tampa employee(s), or any immediate family member* or close personal relation** of an elected or appointed officer of the City of Tampa or City employee(s) is also an owner, corporate officer, agent, employee, stockholder, or has a controlling financial interest***, etc., of their business.

**Immediate family* means spouse, parents and children of the person involved.

***Close personal relationship* means dating, cohabitation, and/or having an intimate sexual relationship. Dating includes but is not limited to casual dating, serious dating, or casual sexual involvement where the parties have no intention of carrying on a long-term relationship, cohabitation, and any other conduct or behavior normally associated with romantic or sexual relationships. This definition applies regardless of the sexual orientation of the employees involved. Persons involved in a close personal relationship shall be referred to as a "close personal relation."

****Controlling financial interest* means ownership, directly or indirectly, to ten (10) percent or more of the outstanding capital stock in any corporation or a direct or indirect interest of ten (10) percent or more in a firm, partnership, or other business entity or such other interest or position in a business entity sufficient to allow him/her or her to control its operations.

Indicate either "yes" (a City employee, elected or appointed official is also associated with your business), or "no". If yes, give person(s) name(s) and position(s) with your business.

YES _____ NO X

NAME(S) / POSITION(S)

N/A

FIRM NAME: Bliss Products and Services, Inc.

BY (PRINTED NAME): Gregg Bliss

BY (SIGNATURE): Gregg Bliss

TITLE: President

DATE: 4/19/2021

BID RESPONSE FOR
SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT

Please Print or Type

We the undersigned, as Bidders, hereby declare that we have carefully read this proposal or bid and the provisions, terms and conditions concerning the equipment, materials, supplies or services as called for, and with full knowledge and understanding of the requirements and conditions, do hereby agree to furnish and to deliver as indicated, FOB, City Facility Location, with all transportation charges prepaid, and for the prices quoted thereon as follows.

I. **Site Furnishings and Playground Equipment**	**Catalog Name**	**Date**	**Discount**
a. Catalog	Play & Park Structures	4/19/2021	5%.
b. Catalog	Big Toys		5%.
C. Catalog	Ultra Play		10%.
d. Catalog	Sportsplay		10%.
e. Catalog	Ultra Site		10%.
f. Catalog	Bark Park		10%.

If additional space is needed, attach additional pages using headings as indicated above (see additional attached)

2. Installation of Site Furnishings, Playground Equipment, Shelters, Shade Structures, Gazebos, and Trellises, Etc. To be based on a firm fixed percentage of the equipment cost (the total cost after discount has been taken, but before freight has been added).	The firm, fixed percentage is 35 % (playgrounds ONLY) *Priced per job for all other equipment.
3. Is your written factory certification for the installation of playground equipment attached?	(Yes) No
4. If you are using a subcontractor for the installation of playground equipment list the Certified Installer's Company Name/s:	Name: TBD All jobs are assigned to sub contractors once PO's are in hand.
5. Does your company provide repair service?	(Yes) No $ 300.00/hour
6. Engineered Wood Fiber Mulch (to include ground preparation and Geotextile separator installation) Is manufacturer's specification data sheet attached?	(Yes) No $ 75.00 per Cu. Ft $ N/A per Sq. Ft Minimum order: 100 CY

Site Furnishings and Playground Equipment	Catalog Name	Date	Discount
Catalog	Superior Shade	4/19/2021	10%
Catalog	Modern Shade	4/19/2021	10%
Catalog	Cedar Forest Products	4/19/2021	10%
Catalog	Reed's Metals	4/19/2021	10%
Catalog	Superior Shelter	4/19/2021	10%
Catalog	Frog Furnishings	4/19/2021	5%
Catalog	Freenotes Harmony	4/19/2021	5%
Catalog	Action Fit	4/19/2021	5%
Catalog	Safety 1st	4/19/2021	5%
Catalog	National Recreation Systems	4/19/2021	5%
Catalog	Dura Play	4/19/2021	5%
Catalog	ARS Landscaping	4/19/2021	5%

7. Surfacing Products (Poured-In-Place Rubber, Artificial Turf, FlexiPave, Concrete and Brick Pavers) Is price table attached Is manufacturer's specification data sheet attached? Have samples been submitted?	Bidding safety1st surfacing (Yes) No (Yes) No (Yes) No
8. Have you submitted catalog(s), CD(s) or printed price sheet(s) to be considered as part of this bid? Failure to submit may disqualify your bid.	(Yes) No
9. Minimum order?	(Yes) No If so, $ Repairs only: $2000.00
10. List any Exclusions:	
11. Contact Information: Name: Kristen George Phone: 800-248-2547 Cell: 404-924-0504 Email: kristen@blissproducts.com	

Firm Name: Bliss Products and Services, Inc.

Authorized Representative's Name: Gregg Bliss

Authorized Representative's Title: President

Address: 6831 S. Sweetwater Rd.

City: Lithia Springs State: GA Zip: 30122

Telephone No.: 800-248-2547 Fax No.: 866-920-1915 Email: info@blissproducts.com

Federal I.D. #: 59-2413631

Type Organization: [ ] Individual [ ] Small Business [ ] Non-Profit [ ] LLC
[ ] Partnership [X] Corporation [ ] Joint Venture

Business is licensed (unless exempt by applicable law), permitted and certified to do business in the State of Florida:
[X] Yes [ ] No License # CGC1516244

Minority Business Status: [ ] Black [ ] Hispanic [ ] Woman [ ] Other

Is your business certified as a minority business with any government agency? [ ] Yes [X] No. If yes, please list below:

Agency Name	Certification Number	Expiration Date

Sub-Contracting Submittals required: Forms MBD-10, MBD-20 must be submitted with the bid/proposal.

By signing this bid the Bidder complies with all of the requirements of the bid including but not limited to Communication Policy and City of Tampa Ethics Code contained in Section 4 of the GENERAL CONDITIONS.

Authorized Signature: _____ Date: 4/19/2021

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules
City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)
(FORM MBD-10)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421
Company Name: Bliss Products and Services, Inc. Address: 6831 S. Sweetwater Rd.
Federal ID: 59-2413631 Phone: 800-248-2547 Fax: 813-920-1915 Email: info@blissproducts.com

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.
[ ] **No Firms were contacted or solicited for this contract.**
[X] **No Firms were contacted because:** All subcontracting is done after receipt of PO
[ ] **See attached list of additional Firms solicited and all supplemental information (List must comply to this form)**
Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=WMBE O = Neither / Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub–contracting opportunities on this contract.

Signed: Gregg Bliss Name/Title: Gregg Bliss, President Date: 4/19/2021

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive
Forms must be included with Bid / Proposal

MBD 10 rev./effective 02/2016

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 3 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.: 21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421

Company Name: Bliss Products and Services, inc. Address: 6531 S Sweetwater Rd.

Federal ID: 59-2413631 Phone: 800-249-2547 Fax: 866-920-1915 Email: info@blissproducts.com

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

[ ] **See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)**
Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

[ ] **No Subcontracting/consulting (of any kind) will be performed on this contract.**

[X] **No Firms are listed to be utilized because:** All subcontracting is done after receipt of PO

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=WMBE O =Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %

Total ALL Subcontract / Supplier Utilization $ _____

Total SLBE Utilization $ _____

Total WMBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. ____**%** **Percent WMBE Utilization of Total Bid/Proposal Amt.** ____**%**

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: _____ Name/Title: Gregg Bliss, President Date: 4/19/2021

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

MBD 20 rev./effective 02/2016

Topics

BIDDER'S AFFIDAVIT

Before me, the undersigned authority who is duly authorized by law to administer oaths and take acknowledgements, personally appeared

SONIA M PERKINS

AFFIANT'S NAME (PERSON'S NAME)

Who, after being duly cautioned and sworn, and being fully aware of the penalties of perjury, does hereby depose and declare, on his/her own behalf or as a representative on behalf of a partnership or corporation, or other entity that is the Bidder in the matter at hand, as follows:

1. That the Bidder, if a natural person, is of lawful age.

2. That if the Bidder is a partnership, or a corporation, or other legal person or entity recognized in the State of Florida, it has complied with all laws and ordinances governing the formation and continued existence of such entities, including but not limited to, if a Florida corporation, to the filing of its Articles of Incorporation with the Florida Secretary of State and if a corporation incorporated under the laws of a state other than Florida, that it is duly authorized to do business in the State of Florida; that it is currently an active corporation or entity fully authorized to do business; and that the undersigned is representative of the corporation or entity authorized to make this affirmation and declaration and who has the power to bind said corporation or entity.

3. That if the Bidder is operating under a fictitious name, Bidder has currently complied with and any and all laws and procedures governing the operation of businesses under fictitious names in the State of Florida;

4. That the Bidder has not submitted a rigged Bid, nor engaged in collusive bidding, or a collusive bidding arrangement, or fraudulent bidding, or entered into a conspiracy in connection with this bid with any other natural person, partnership, corporation or other entity making a bid for the same purpose. The Bidder has not entered into any understanding or agreement with any other person or entity where one or more such persons or entities agrees not to bid or fixing the prices to be bid.

5. In the event that the City determines that the Bidder has participated in any collusive, deceptive or fraudulent practices in derogation of the statements in this Affidavit the City, in addition to any other remedy it may exercise, will have the right to debar the Bidder. The contract let under such circumstances shall be deemed invalid.

6. That the Bidder is not in arrears to the City of Tampa upon debt or contract and is not in default, as surety or otherwise, of any obligation to the City, Hillsborough County or the State of Florida

7. That no officer or employee of the City, either individually or through any firm, corporation or business of which he/she is a stockholder or holds office, shall receive any substantial benefit or profit out of the contract or award to this Bidder; nor does the Bidder know of any City officer or employee having any financial interest in assisting the Bidder to obtain, or in any other way effecting, the award of the contract to this Bidder.

8. That, by submitting this bid, the Bidder certifies that he/she has fully read and understands the bid method and has full knowledge of the scope, nature, and quality of work to be performed or the services to be rendered.

9. That, by submitting this Bid, Affiant certifies compliance with Section 287.135, Florida Statutes and for contracts for goods or services of $1 million or more, that the Bidder is not on the Scrutinized Companies with Activities in the Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, and is not engaged in business operations in Cuba or Syria, and that for contracts for goods or services of any amount, that the Bidder is not on the Scrutinized Companies that Boycott Israel List, and is not engaged in a boycott of Israel. Affiant understands that pursuant to Section 287.135, Florida Statutes, the submission of a false certification may subject Bidder to civil penalties, attorney's fees, other costs and termination of any contract that is awarded.

The bid documents contain a General Conditions Section and may, in most cases, contain a Technical Specification Section. General Conditions contain general requirements and Technical Specifications detail the scope of the goods and/or services requested. The Technical Specifications shall always govern whenever there appears to be a conflict.

The Bidder shall comply with the applicable requirements of Federal and state laws, all Codes and Ordinances of the City of Tampa as amended from time to time and any applicable professional regulations.

FURTHER AFFIANT SAYETH NOT.

Bidder: Complete the applicable Acknowledgement for An Individual Acting In His/Her Own Right, A Partnership or A Corporation, according to your firm type.

FOR AN INDIVIDUAL ACTING IN HIS/HER OWN RIGHT

State of Florida
County of Volusia

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization this 19 day of April 2021, by Sonia Perkins, who is personally known to me or who has produced identification and who did (did not) take an oath.

Signature of Notary Public

Signature of Affiant

Notary Public
State of: Florida
My Commission
Expires: May 10, 2022

Terri Ann Krynicki
Printed, typed or stamped
Commissioned name of notary public

SONIA M PERKINS
Sonia M. Perkins
Printed or typed name of Affiant

TERRI KRYNICKI
Commission # GG 216655
Expires May 10, 2022
Bonded Thru Budget Notary Services

FOR AN ENTITY

State of _____
County of _____

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization this ____ day of _____ 20____, by _____, as _____, of _____ a ☐ Partnership, ☐ Joint Venture, ☐ Corporation, ☐ Limited Liability Company (LLC) or ☐ Other _____, on behalf of such entity. Such individual is personally known to me or has produced identification.

Type of identification produced: _____

Signature of Notary Public

Signature of Affiant

Notary Public
State of: _____
My Commission
Expires: _____

Printed, typed or stamped
Commissioned name of notary public

SONIA M PERKINS
Printed or typed name of Affiant

BIDDER SUBMITTAL CHECKLIST
BID DOCUMENTS TO BE RETURNED

BID #: 31041421	
BID TITLE: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, AND INSTALLATION, REPAIRS AND REPLACEMENT	
THE FOLLOWING FORMS MUST BE INCLUDED IN BID PACKAGE PLEASE ACKNOWLEDGE BY ANSWERING "YES"	
	YES
Did you sign your bid? *	☑
Did you sign and complete MBD Forms 10 and 20? *	☑
Did you fully complete the price proposal /bid response page? *	☑
Did you complete the Bidder's Affidavit and associated notarized form? *	☑
If an addendum has been issued that changed the Bid Response Page(s), did you provide pricing on the pages marked "Addendum" *	☑
Did you include catalogs, price sheets and or CD's as indicated per Technical Specification? *	☑
Did you include copies of certificates and or licenses as indicated per Technical Specification? *	☑
Did you include pricing for Engineered Fiber Wood Mulch per Technical Specification? *	☑
Did you include Manufacture Specifications as per Technical Specification? *	☑
Did you List pricing based on thickness and color options per Section 11 of the Technical Specifications?*	☑
Is your company name clearly be indicated on the attached price sheet?*	☑

*** Failure to submit these forms shall result in your bid being deemed as "non-responsive".**

Requested Voluntary Information Regarding
Bidder's Initial Employment Application Content

The Bidder's own initial application for employment has criminal history screening practices similar in nature to the practices contained in Chapter 12, Article VI – Criminal History Screening Practices, City of Tampa Code of Ordinances. *(Responses, whether "Yes" or "No", are for informational purposes only and will not be used as a basis of award or denial, nor as a basis for any protest,*: [_] Yes [x_] No

Firm Name: TOP LINE RECREATION INC

Authorized signature: _____ Date: 04/06/2021

ATTACHMENT A - CONFLICT OF INTEREST DISCLOSURE FORM

For purposes of determining any possible conflict of interest, all bidders/proposers, must disclose if any elected or appointed officer of the City of Tampa, City of Tampa employee(s), or any immediate family member* or close personal relation** of an elected or appointed officer of the City of Tampa or City employee(s) is also an owner, corporate officer, agent, employee, stockholder, or has a controlling financial interest***, etc., of their business.

**Immediate family* means spouse, parents and children of the person involved.

***Close personal relationship* means dating, cohabitation, and/or having an intimate sexual relationship. Dating includes but is not limited to casual dating, serious dating, or casual sexual involvement where the parties have no intention of carrying on a long-term relationship, cohabitation, and any other conduct or behavior normally associated with romantic or sexual relationships. This definition applies regardless of the sexual orientation of the employees involved. Persons involved in a close personal relationship shall be referred to as a "close personal relation."

****Controlling financial interest* means ownership, directly or indirectly, to ten (10) percent or more of the outstanding capital stock in any corporation or a direct or indirect interest of ten (10) percent or more in a firm, partnership, or other business entity or such other interest or position in a business entity sufficient to allow him/her or her to control its operations.

Indicate either "yes" (a City employee, elected or appointed official is also associated with your business), or "no". If yes, give person(s) name(s) and position(s) with your business.

YES _____ NO X

NAME(S) / POSITION(S)

_____

_____

_____

_____

FIRM NAME: TOP LINE RECREATION, INC

BY (PRINTED NAME): SONIA M PERKINS

BY (SIGNATURE): Sonia Perkins

TITLE: PRESIDENT

DATE: 04/06/21

BID RESPONSE FOR
SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT

Please Print or Type

We the undersigned, as Bidders, hereby declare that we have carefully read this proposal or bid and the provisions, terms and conditions concerning the equipment, materials, supplies or services as called for, and with full knowledge and understanding of the requirements and conditions, do hereby agree to furnish and to deliver as indicated, FOB, City Facility Location, with all transportation charges prepaid, and for the prices quoted thereon as follows.

I. **Site Furnishings and Playground Equipment**	**Catalog Name**	**Date**	**Discount**
a. Catalog	BCI BURKE PLAYGROUNDS	04/06/21	5%
b. Catalog	SHADE SYSTEMS	04/06/21	5%
C. Catalog	AMERICANA	04/06/21	5%
d. Catalog	MYTCOAT	04/06/21	3%
e. Catalog	PREMIER POLYSTEEL	04/06/21	3%
f. Catalog	PERCUSISSION PLAY	04/06/21	5%

If additional space is needed, attach additional pages using headings as indicated above

2. Installation of Site Furnishings, Playground Equipment, Shelters, Shade Structures, Gazebos, and Trellises, Etc. To be based on a firm fixed percentage of the equipment cost (the total cost after discount has been taken, but before freight has been added).	The firm, fixed percentage is 36 %
3. Is your written factory certification for the installation of playground equipment attached?	x Yes No
4. If you are using a subcontractor for the installation of playground equipment list the Certified Installer's Company Name/s:	Name: AL BOSGRAAF & SONS,INC HURLEY CONSTRUCTION, INC SAFETY 1ST PLAYGROUNDS, INC
5. Does your company provide repair service?	x Yes No $ 350 /hour
6. Engineered Wood Fiber Mulch (to include ground preparation and Geotextile separator installation) Is manufacturer's specification data sheet attached?	X Yes No $ 38.00 per Cu. Ft $ _____ per Sq. Ft

I. Site Furnishings and Playground Equipment	Catalog Name	Date	Discount
g. Catalog	YALP	04/06/21	10%
h. Catalog			
i. Catalog			
j. Catalog			
l. Catalog			
m. Catalog			

7. Surfacing Products (Poured-In-Place Rubber, Artificial Turf, FlexiPave, Concrete and Brick Pavers) Is price table attached Is manufacturer's specification data sheet attached? Have samples been submitted?	x Yes x Yes x Yes	No No No
8. Have you submitted catalog(s), CD(s) or printed price sheet(s) to be considered as part of this bid? Failure to submit may disqualify your bid.	x Yes	No
9. Minimum order?	Yes If so, $_____	x No

10. List any Exclusions:

11. Contact Information:

Name: TERRY R PERKINS Phone: 386-575-8359

Cell: 407-466-2909 Email: TERRYP@TOPLINEREC.COM

Firm Name: TOP LINE RECRATION, INC

Authorized Representative's Name: SONIA M PERKINS

Authorized Representative's Title: PRESIDENT

Address: 2922 HOWLAND BLVD - SUITE 4

City: DELTONA State: FL Zip: 32725

Telephone No.: 386-575-8359 Fax No.: 888-909-0549 Email: SONIAP@TOPLINEREC.COM

Federal I.D. #: 45-3009109

Type Organization: [ ] Individual [ ] Small Business [ ] Non-Profit [ ] LLC
[ ] Partnership [X] Corporation [ ] Joint Venture

Business is licensed (unless exempt by applicable law), permitted and certified to do business in the State of Florida:
[X] Yes [ ] No License # 74-8017064943-7

Minority Business Status: [ ] Black [X] Hispanic [X] Woman [ ] Other

Is your business certified as a minority business with any government agency? [X] Yes [ ] No. If yes, please list below:

Agency Name	Certification Number	Expiration Date
NMSDC	FL04221	10/01/2021
HILLSBOROUGH COUNTY	HC-2717/20	09/14/2022

Sub-Contracting Submittals required: Forms MBD-10, MBD-20 must be submitted with the bid/proposal.

By signing this bid the Bidder complies with all of the requirements of the bid including but not limited to Communication Policy and City of Tampa Ethics Code contained in Section 4 of the GENERAL CONDITIONS.

Authorized Signature: Sonia Perkins Date: 04/06/21

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules
City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)
(FORM MBD-10)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421

Company Name: TOP LINE RECREATION,INC Address: 2922 HOWLAND BLVD -ST 4 - DELTONA, FL 32725

Federal ID: 45-3009109 Phone: 386-575-8359 Fax: 888-909-0549 Email: SONIAP@TOPLINEREC.COM

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.

[ ] No Firms were contacted or solicited for this contract.

[ ] No Firms were contacted because:

[ ] See attached list of additional Firms solicited and all supplemental information (List must comply to this form)

Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=WMBE O = Neither / Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N
26-3998380 / O	SAFETY 1ST PLAYGROUNDS 4711 AUSTRALIAN AV - ST 5 - WEST PALM BEACH, FL 33407 561-881-8630	CF CM	909	E	N
59-2084524 / O	AL BOSGRAAF & SONS, INC 240 REBEL RUNM OSTEEN, FL 32764 407-402-8495 - ALBANDSONS@GMAIL.COM	CF CM	909	E	N
47-3691574 / O	HURLEY CONSTRUCTION, INC 6026 ALLEN ST - MT. DORA, FL 32757 321-231-6195 - GHURLEY3006@GMAIL.COM	CF CM	909	E	N

Failure to Complete, Sign and Submit this form with your Bid or Proposal Shall render the Bid Non-Responsive (Do Not Modify This Form)

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub–contracting opportunities on this contract.

Signed: [signature] Name/Title: PRESIDENT Date: 04-06-21

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

MBD 10 rev./effective 02/2016

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 3 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421

Company Name: TOP LINE RECREATION, INC Address: 2922 HOWLAND BLVD - SUITE 4

Federal ID: 45-3009109 Phone: 386-575-8359 Fax: 888-909-0549 Email: SONIAP@TOLINEREC.COM

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

[ ] See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)

Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

[ ] No Subcontracting/consulting (of any kind) will be performed on this contract.

[ ] No Firms are listed to be utilized because: _____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=WMBE O =Neither / Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %
26-3998380 / O	SAFETY 2ST PLAYGROUND 4711 N AUSTRALIAN AVE - ST 3 - WEST PALM BEACH,FL 33407 561-881-8630 - GUYSOREC@AOL.COM	CF CM	909	N/A	20%
59-2084524 / O	AL BOSGRAAF & SONS,INC 240 REBEL RUN - OSTEEN,FL 32764 407-402-8495, DAWNWILCOX279@GMAIL.COM	CF CM	909	N/A	20%
47-3691574 / O	HURLEY CONSTRCTION, INC 6026 ALLEN STREET - MT. DORA, FL 32757 321-231-6195 - GHURLEY3006@GMAIL.COM	CF CM	909	N/A	20%

Shall render the Bid Non-Responsive.
(Do Not Modify This Form)

Total ALL Subcontract / Supplier Utilization $ _____

Total SLBE Utilization $ _____

Total WMBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. ____% Percent WMBE Utilization of Total Bid/Proposal Amt. ____%

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: _____ Name/Title: PRESIDENT Date: 04/06/2021

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

MBD 20 rev./effective 02/2016

NMSDC
National Minority Supplier Development Council

THIS CERTIFIES THAT

Top Line Recreation, Inc.

* Nationally certified by the: **FLORIDA STATE MINORITY SUPPLIER DEVELOPMENT COUNCIL**

*NAICS Code(s): 238990; 339920; 423910; 423390

* Description of their product/services as defined by the North American Industry Classification System (NAICS)

10/01/2020	FL04221
Issued Date	**Certificate Number**
10/01/2021	Adrienne Trimble
Expiration Date	**Beatrice Louissaint, President & CEO**

By using your password (NMSDC issued only), authorized users may log into NMSDC Central to view the entire profile: http://nmsdc.org

Certify, Develop, Connect, Advocate.

* MBEs certified by an Affiliate of the National Minority Supplier Development Council, Inc.®

Board of County Commissioners
Economic Development Department
Minority and Disadvantaged Business Development

Minority/Woman Business Certification

TOP LINE RECREATION INC

HC-2717/20

Valid from September 14, 2020 - September 14, 2022

Approved Lines of Business:

Full Service Recreation Agency Supplying Park, Playground Park and Sporting Equipment

Theresa Kempa
Minority and Disadvantaged Business Manager
Economic Development Department

City of Tampa Florida

Minority and Small Business Development

Certification Program
This is to certify that in accordance with City of Tampa Ordinance 2008-89

TOP LINE RECREATION INC

is hereby certified as a

Minority Business Enterprise (MBE)

In the following specialty(ies)

Full service recreation agency supplying park, playground park and sporting equipment; Playgrounds, benches, shades, pavillians, gazebos, outdoor fitness, surfaces, synthetic lawn, picnic tables, litter receptacle, bicycle racks
The certification is valid from October 13, 2020 to October 13, 2022

Updates for recertification are required prior to the expiration date listed above. If at any time changes are made in the firm that are not in concert with our eligibility requirements, you agree to report those changes to us for evaluation. The City of Tampa reserves the right to terminate this certification at anytime it determines eligibility requirements are not being met.

Gregory K. Hart, Manager
Minority and Small Business Manager

Osceola County Board of County Commissioners

Minority, Women, Service Disabled Veteran Business Enterprise

This certificate validates reciprocal certification for

Top Line Recreation

Per certification with

Florida Minority Supplier Development Council

Valid from: 10/12/2020 to 10/1/2021

Supplier Development Date

10/12/2020



Procurement Services
Supplier Development
1 Courthouse Square, Suite 2300
Kissimmee, FL 34741
Phone: 407-742-0900
Fax: 407-742-0901
www.Osceola.org

State of Florida
Department of State

I certify from the records of this office that TOPLINE RECREATION INC. is a corporation organized under the laws of the State of Florida, filed on August 17, 2011, effective August 16, 2011.

The document number of this corporation is P11000073376.

I further certify that said corporation has paid all fees due this office through December 31, 2021, that its most recent annual report/uniform business report was filed on January 13, 2021, and that 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 Thirteenth day of January, 2021

GREAT SEAL OF THE STATE OF FLORIDA
IN GOD WE TRUST

Secretary of State

Tracking Number: 3898298009CC

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

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

Burke
PLAY THAT MOVES YOU.

To Whom It May Concern,

Please consider this letter as verification that Al Bosgraaf & Sons, Inc, 240 Rebel Run, Osteen, Florida, is a Certified Installer of playground, park and recreation equipment manufactured by BCI Burke Company, LLC.

Sincerely,

Ken Krug
Plant Manager
BCI Burke Company, LLC

KK /ew

Burke.
PLAY THAT MOVES YOU.

To Whom It May Concern,

Please consider this letter as verification that Hurley Construction, 6026 Allen Street, Mt. Dora, Florida, is an Authorized Installer of playground, park and recreation equipment manufactured by BCI Burke Company, LLC.

Sincerely,

Ken Krug
Plant Manager
BCI Burke Company, LLC

KK /ew

Shade systems™ INC.
4150 S.W. 19 Street • Ocala, FL 34474
Tel.: 352/237-0135 • **TOLL-FREE: 1-800-609-6066** • FAX: 352/237-2256
E-mail: info@shadesystems.com • Web: www.shadesystemsinc.com

Dear Board of County Commissioners,

This letter is to confirm that Al Bosgraaf and Sons at 240 Rebel Run – Osteen, FL is authorized to install our shade systems.

If there is need of additional information, please feel free to contact me.

Sincerely,



Margo Talbot
Customer Service Manager
Shade Systems, Inc.

Shade systems™ INC.
4150 S.W. 19 Street • Ocala, FL 34474
Tel.: 352/237-0135 • **TOLL-FREE: 1-800-609-6066** • FAX: 352/237-2256
E-mail: info@shadesystems.com • Web: www.shadesystemsinc.com

Dear Board of County Commissioners,

This letter is to confirm that Hurley Construction, Inc. at 6026 Allen St. Mount Dora, FL is authorized to install our shade systems.

If there is need of additional information, please feel free to contact me.

Sincerely,



Margo Talbot
Customer Service Manager
Shade Systems, Inc.

AMERICANA
OUTDOORS

To Whom It May Concern,
Please consider this letter as verification that Al Bosgraaf and Sons, Inc. 240 Rebel Run, Osteen , FL, is an Authorized Installer of shelters and pavilions manufactured by Americana Building Products.

Sincerely,

Anthony Purcell

VP Sales

Americana Building Products

AMERICANA
OUTDOORS

To Whom It May Concern,
Please consider this letter as verification that Hurley Construction, 6026 Allen Street, Mt. Dora, Florida, is an Authorized Installer of shelters and pavilions manufactured by Americana Building Products.

Sincerely,

Anthony Purcell

VP Sales

Americana Building Products

National Recreation and Park Association

Let it be known that

GERALD BOSGRAAF

has met the requirements of the standards set forth by the
National Certification Board
and is hereby granted certification as a

Certified Playground Safety Inspector

CPSI Certified Playground Safety Inspector

CHAIRPERSON

NRPA PRESIDENT AND CEO

April 19, 2017
DATE CERTIFIED

38173-0520
CERTIFICATION NUMBER

May 01, 2020
EXPIRATION DATE

NRPA National Recreation and Park Association

National Recreation and Park Association

Let it be known that

GLEN HURLEY

has met the requirements of the standards set forth by the
National Certification Board
and is hereby granted certification as a

Certified Playground Safety Inspector

CHAIRPERSON

NRPA PRESIDENT AND CEO

November 22, 2019
DATE CERTIFIED

47747-1222
CERTIFICATION NUMBER

December 01, 2022
EXPIRATION DATE

NRPA National Recreation and Park Association

Daniel (Kakat)

BIDDER'S AFFIDAVIT

Before me, the undersigned authority who is duly authorized by law to administer oaths and take acknowledgements, personally appeared

Shane Dann

AFFIANT'S NAME (PERSON'S NAME)

Who, after being duly cautioned and sworn, and being fully aware of the penalties of perjury, does hereby depose and declare, on his/her own behalf or as a representative on behalf of a partnership or corporation, or other entity that is the Bidder in the matter at hand, as follows:

1. That the Bidder, if a natural person, is of lawful age.

2. That if the Bidder is a partnership, or a corporation, or other legal person or entity recognized in the State of Florida, it has complied with all laws and ordinances governing the formation and continued existence of such entities, including but not limited to, if a Florida corporation, to the filing of its Articles of Incorporation with the Florida Secretary of State and if a corporation incorporated under the laws of a state other than Florida, that it is duly authorized to do business in the State of Florida; that it is currently an active corporation or entity fully authorized to do business; and that the undersigned is representative of the corporation or entity authorized to make this affirmation and declaration and who has the power to bind said corporation or entity.

3. That if the Bidder is operating under a fictitious name, Bidder has currently complied with and any and all laws and procedures governing the operation of businesses under fictitious names in the State of Florida;

4. That the Bidder has not submitted a rigged Bid, nor engaged in collusive bidding, or a collusive bidding arrangement, or fraudulent bidding, or entered into a conspiracy in connection with this bid with any other natural person, partnership, corporation or other entity making a bid for the same purpose. The Bidder has not entered into any understanding or agreement with any other person or entity where one or more such persons or entities agrees not to bid or fixing the prices to be bid.

5. In the event that the City determines that the Bidder has participated in any collusive, deceptive or fraudulent practices in derogation of the statements in this Affidavit the City, in addition to any other remedy it may exercise, will have the right to debar the Bidder. The contract let under such circumstances shall be deemed invalid.

6. That the Bidder is not in arrears to the City of Tampa upon debt or contract and is not in default, as surety or otherwise, of any obligation to the City, Hillsborough County or the State of Florida

7. That no officer or employee of the City, either individually or through any firm, corporation or business of which he/she is a stockholder or holds office, shall receive any substantial benefit or profit out of the contract or award to this Bidder; nor does the Bidder know of any City officer or employee having any financial interest in assisting the Bidder to obtain, or in any other way effecting, the award of the contract to this Bidder.

8. That, by submitting this bid, the Bidder certifies that he/she has fully read and understands the bid method and has full knowledge of the scope, nature, and quality of work to be performed or the services to be rendered.

9. That, by submitting this Bid, Affiant certifies compliance with Section 287.135, Florida Statutes and for contracts for goods or services of $1 million or more, that the Bidder is not on the Scrutinized Companies with Activities in the Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, and is not engaged in business operations in Cuba or Syria, and that for contracts for goods or services of any amount, that the Bidder is not on the Scrutinized Companies that Boycott Israel List, and is not engaged in a boycott of Israel. Affiant understands that pursuant to Section 287.135, Florida Statutes, the submission of a false certification may subject Bidder to civil penalties, attorney's fees, other costs and termination of any contract that is awarded.

The bid documents contain a General Conditions Section and may, in most cases, contain a Technical Specification Section. General Conditions contain general requirements and Technical Specifications detail the scope of the goods and/or services requested. The Technical Specifications shall always govern whenever there appears to be a conflict.

The Bidder shall comply with the applicable requirements of Federal and state laws, all Codes and Ordinances of the City of Tampa as amended from time to time and any applicable professional regulations.

FURTHER AFFIANT SAYETH NOT.
Bidder: Complete the applicable Acknowledgement for An Individual Acting In His/Her Own Right, A Partnership or A Corporation, according to your firm type.

FOR AN INDIVIDUAL ACTING IN HIS/HER OWN RIGHT

State of _____
County of _____

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization this _____ day of _____ 20____, by _____, who is personally known to me or who has produced identification and who did (did not) take an oath.

_____ Signature of Notary Public

_____ Signature of Affiant

Notary Public
State of: _____
My Commission
Expires: _____

_____ Printed, typed or stamped Commissioned name of notary public

_____ Printed or typed name of Affiant

FOR AN ENTITY

State of Georgia
County of Carroll

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or ☐ online notarization this 8th day of April 20 21, by Shane Lanier, as President/ CEO, of Lanier Plans Inc. dba KorKat a ☐ Partnership, ☐ Joint Venture, ☒ Corporation, ☐ Limited Liability Company (LLC) or ☐ Other _____, on behalf of such entity. Such individual is personally known to me or has produced identification.

Type of identification produced: Personally known to me

_____ Signature of Notary Public

_____ Signature of Affiant

LESLIE N. DAVIS NOTARY My Comm. Expires September 24, 2021 PUBLIC CARROLL COUNTY, GEORGIA

Notary Public
State of: Georgia
My Commission
Expires: 9-24-2021

Leslie N. Davis
Printed, typed or stamped Commissioned name of notary public

Shane Lanier
Printed or typed name of Affiant

BIDDER SUBMITTAL CHECKLIST
BID DOCUMENTS TO BE RETURNED

BID #: 31041421	
BID TITLE: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, AND INSTALLATION, REPAIRS AND REPLACEMENT	
THE FOLLOWING FORMS MUST BE INCLUDED IN BID PACKAGE PLEASE ACKNOWLEDGE BY ANSWERING "YES"	
	YES
Did you sign your bid? *	X
Did you sign and complete MBD Forms 10 and 20? *	X
Did you fully complete the price proposal /bid response page? *	X
Did you complete the Bidder's Affidavit and associated notarized form? *	X
If an addendum has been issued that changed the Bid Response Page(s), did you provide pricing on the pages marked "Addendum" *	X
Did you include catalogs, price sheets and or CD's as indicated per Technical Specification? *	X
Did you include copies of certificates and or licenses as indicated per Technical Specification? *	X
Did you include pricing for Engineered Fiber Wood Mulch per Technical Specification? *	X
Did you include Manufacture Specifications as per Technical Specification? *	X
Did you List pricing based on thickness and color options per Section 11 of the Technical Specifications?*	X
Is your company name clearly be indicated on the attached price sheet?*	X

*** Failure to submit these forms shall result in your bid being deemed as "non-responsive".**

Requested Voluntary Information Regarding
Bidder's Initial Employment Application Content

The Bidder's own initial application for employment has criminal history screening practices similar in nature to the practices contained in Chapter 12, Article VI – Criminal History Screening Practices, City of Tampa Code of Ordinances. *(Responses, whether "Yes" or "No", are for informational purposes only and will not be used as a basis of award or denial, nor as a basis for any protest)*: [_] Yes [_] No

Firm Name: Lanier Plans Inc. dba KorKat

Authorized signature: _____ Date: 04/08/2021

ATTACHMENT A - CONFLICT OF INTEREST DISCLOSURE FORM

For purposes of determining any possible conflict of interest, all bidders/proposers, must disclose if any elected or appointed officer of the City of Tampa, City of Tampa employee(s), or any immediate family member* or close personal relation** of an elected or appointed officer of the City of Tampa or City employee(s) is also an owner, corporate officer, agent, employee, stockholder, or has a controlling financial interest***, etc., of their business.

**Immediate family* means spouse, parents and children of the person involved.

***Close personal relationship* means dating, cohabitation, and/or having an intimate sexual relationship. Dating includes but is not limited to casual dating, serious dating, or casual sexual involvement where the parties have no intention of carrying on a long-term relationship, cohabitation, and any other conduct or behavior normally associated with romantic or sexual relationships. This definition applies regardless of the sexual orientation of the employees involved. Persons involved in a close personal relationship shall be referred to as a "close personal relation."

****Controlling financial interest* means ownership, directly or indirectly, to ten (10) percent or more of the outstanding capital stock in any corporation or a direct or indirect interest of ten (10) percent or more in a firm, partnership, or other business entity or such other interest or position in a business entity sufficient to allow him/her or her to control its operations.

Indicate either "yes" (a City employee, elected or appointed official is also associated with your business), or "no". If yes, give person(s) name(s) and position(s) with your business.

YES _____ NO X

NAME(S) / POSITION(S)

_____

_____

_____

_____

FIRM NAME: Lanier Plans Inc. dba KorKat

BY (PRINTED NAME): Shane Lanier

BY (SIGNATURE): 

TITLE: President/ CEO

DATE: 04/08/2021

BID RESPONSE FOR
SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT

Please Print or Type

We the undersigned, as Bidders, hereby declare that we have carefully read this proposal or bid and the provisions, terms and conditions concerning the equipment, materials, supplies or services as called for, and with full knowledge and understanding of the requirements and conditions, do hereby agree to furnish and to deliver as indicated, FOB, City Facility Location, with all transportation charges prepaid, and for the prices quoted thereon as follows.

1. Site Furnishings and Playground Equipment	Catalog Name	Date	Discount
a. Catalog	Coverworx	4/15/2021	3%
b. Catalog	Superior Playgrounds	4/15/2021	3%
C. Catalog	Superior Amenities	4/15/2021	3%
d. Catalog	Superior Shade	4/15/2021	3%
e. Catalog	Superior Play Components	4/15/2021	3%
f. Catalog			

If additional space is needed, attach additional pages using headings as indicated above

2. Installation of Site Furnishings, Playground Equipment, Shelters, Shade Structures, Gazebos, and Trellises, Etc. To be based on a firm fixed percentage of the equipment cost (the total cost after discount has been taken, but before freight has been added).	The firm, fixed percentage is ~~———%~~ 30-90% Depending on Product
3. Is your written factory certification for the installation of playground equipment attached?	✓Yes No
4. If you are using a subcontractor for the installation of playground equipment list the Certified Installer's Company Name/s:	Name: NA
5. Does your company provide repair service?	✓Yes No $ 100 /hour
6. Engineered Wood Fiber Mulch (to include ground preparation and Geotextile separator installation) Is manufacturer's specification data sheet attached?	✓ Yes No $6.18__ per Cu. Ft $6.18_____ per Sq. Ft

7. Surfacing Products (Poured-In-Place Rubber, Artificial Turf, FlexiPave, Concrete and Brick Pavers) Is price table attached Is manufacturer's specification data sheet attached? Have samples been submitted?	✓ Yes ✓ Yes ✓ Yes	No No No
8. Have you submitted catalog(s), CD(s) or printed price sheet(s) to be considered as part of this bid? Failure to submit may disqualify your bid.	✓ Yes	No
9. Minimum order?	Yes If so, $_____	✓ No
10. List any Exclusions:		
11. Contact Information: Name: Shane Lanier Phone: 770-214-9322 Cell: Email: ShaneL@KorKat.com		

Firm Name: Lanier Plans Inc. dba KorKat

Authorized Representative's Name: Shane Lanier

Authorized Representative's Title: President/ CEO

Address: 221 Cable Industrial Way

City: Carrollton State: GA Zip: 30117

Telephone No.: 770-214-9322 Fax No.: 770-214-9323 Email: ShaneL@KorKat.com

Federal I.D. #: 86-1063618

Type Organization: [ ] Individual [ ] Small Business [ ] Non-Profit [ ] LLC
[ ] Partnership [X] Corporation [ ] Joint Venture

Business is licensed (unless exempt by applicable law), permitted and certified to do business in the State of Florida:
[ ] Yes [ ] No License # _____

Minority Business Status: [ ] Black [ ] Hispanic [ ] Woman [ ] Other

Is your business certified as a minority business with any government agency? [ ] Yes [X] No. If yes, please list below:

Agency Name	Certification Number	Expiration Date

Sub-Contracting Submittals required: Forms MBD-10, MBD-20 must be submitted with the bid/ proposal.

By signing this bid the Bidder complies with all of the requirements of the bid including but not limited to Communication Policy and City of Tampa Ethics Code contained in Section 4 of the GENERAL CONDITIONS.

Authorized Signature: Shane Lanier Date: 04/08/2021

City of Tampa

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules
City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)
(FORM MBD-10)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421
Company Name: Lanier Plans Inc. dba KorKat Address: 221 Cable Industrial Way Carrollton, GA 30117
Federal ID: 86-1063618 Phone: 770-214-9322 Fax: 770-214-9323 Email: ShaneL@KorKat.com

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.
[X] No Firms were contacted or solicited for this contract.
[ ] No Firms were contacted because:
[ ] See attached list of additional Firms solicited and all supplemental information (List must comply to this form)
Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=WMBE O = Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N

Failure to Complete, Sign and Submit this form with your Bid or Proposal Shall render the Bid Non-Responsive (Do Not Modify This Form)

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub–contracting opportunities on this contract.

Signed: _____ Name/Title: Shane Lanier President/ CEO Date: 04/08/2021

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive
Forms must be included with Bid / Proposal

MBD 10 rev./effective 02/2016

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 3 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421

Company Name: Lanier Plans Inc. dba KorKat Address: 221 Cable Industrial Way Carrollton, GA 30117

Federal ID: 86-1063618 Phone: 770-214-9322 Fax: 770-214-9323 Email: ShaneL@Korkat.com

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

[ ] See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)
Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

[X] No Subcontracting/consulting (of any kind) will be performed on this contract.

[ ] No Firms are listed to be utilized because: _____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=WMBE O =Neither / Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials / NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %

Failure to Complete, Sign and Submit this form with your Bid or Proposal Shall render the Bid Non-Responsive. (Do Not Modify This Form)

Total ALL Subcontract / Supplier Utilization $ _____

Total SLBE Utilization $ _____

Total WMBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. ____% Percent WMBE Utilization of Total Bid/Proposal Amt. ____%

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: _____ Name/Title: Shane Lanier President/ CEO Date: 04/08/2021

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive
Forms must be included with Bid / Proposal

MBD 20 rev./effective 02/2016

City of Tampa – DMI Sub-(Contractors/Consultants/Suppliers) Payments [ ] Partial [ ] Final

Contract No.: 21-C-00417 WO#,(if any)_____ Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421
Contractor Name: Lanier Plans Inc. dba korKat Address 221 Cable Industrial Way Carrollton, GA 30117
Federal ID 86-1063618 Phone 770-214-9322 Fax 770-214-9323 Email ShaneL2KorKat.com
GC Pay Period _____ Payment Request/Invoice Number:_____ City Department: _____
Total Amount Requested for pay period:_____ Total Contract Amount(including change orders):_____

Type of Ownership - (F=Female M=Male), BF BM = African Am., HF HM = Hispanic Am., AF AM = Asian Am., NF NM = Native Am., CF CM = Caucasian S = SLBE

Type Trade/Work Activity []Sub []Supplier Federal ID	Company Name Address Phone & Fax	Total Sub Contract Or PO Amount	Amount Paid To Date Amount Pending Previously Reported	Amount To Be Paid For This Period Sub Pay Period Ending Date
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$

Certification: I hereby certify that the above information is a true and accurate account of payments to sub – contractors/consultants on this contract.

Signed _____ Name/Title Shane Lanier President/CEO Date: 04/08/2021
(Modifying This Form or Failure to Complete and Sign May Result in Non-Compliance)

DMI form 30 (rev. 03/12/10) Pg __ of __ [ ] See attached for additional information.

Playmore West

BIDDER'S AFFIDAVIT

Before me, the undersigned authority who is duly authorized by law to administer oaths and take acknowledgements, personally appeared

Luke Russell

AFFIANT'S NAME (PERSON'S NAME)

Who, after being duly cautioned and sworn, and being fully aware of the penalties of perjury, does hereby depose and declare, on his/her own behalf or as a representative on behalf of a partnership or corporation, or other entity that is the Bidder in the matter at hand, as follows:

1. That the Bidder, if a natural person, is of lawful age.

2. That if the Bidder is a partnership, or a corporation, or other legal person or entity recognized in the State of Florida, it has complied with all laws and ordinances governing the formation and continued existence of such entities, including but not limited to, if a Florida corporation, to the filing of its Articles of Incorporation with the Florida Secretary of State and if a corporation incorporated under the laws of a state other than Florida, that it is duly authorized to do business in the State of Florida; that it is currently an active corporation or entity fully authorized to do business; and that the undersigned is representative of the corporation or entity authorized to make this affirmation and declaration and who has the power to bind said corporation or entity.

3. That if the Bidder is operating under a fictitious name, Bidder has currently complied with and any and all laws and procedures governing the operation of businesses under fictitious names in the State of Florida;

4. That the Bidder has not submitted a rigged Bid, nor engaged in collusive bidding, or a collusive bidding arrangement, or fraudulent bidding, or entered into a conspiracy in connection with this bid with any other natural person, partnership, corporation or other entity making a bid for the same purpose. The Bidder has not entered into any understanding or agreement with any other person or entity where one or more such persons or entities agrees not to bid or fixing the prices to be bid.

5. In the event that the City determines that the Bidder has participated in any collusive, deceptive or fraudulent practices in derogation of the statements in this Affidavit the City, in addition to any other remedy it may exercise, will have the right to debar the Bidder. The contract let under such circumstances shall be deemed invalid.

6. That the Bidder is not in arrears to the City of Tampa upon debt or contract and is not in default, as surety or otherwise, of any obligation to the City, Hillsborough County or the State of Florida

7. That no officer or employee of the City, either individually or through any firm, corporation or business of which he/she is a stockholder or holds office, shall receive any substantial benefit or profit out of the contract or award to this Bidder; nor does the Bidder know of any City officer or employee having any financial interest in assisting the Bidder to obtain, or in any other way effecting, the award of the contract to this Bidder.

8. That, by submitting this bid, the Bidder certifies that he/she has fully read and understands the bid method and has full knowledge of the scope, nature, and quality of work to be performed or the services to be rendered.

9. That, by submitting this Bid, Affiant certifies compliance with Section 287.135, Florida Statutes and for contracts for goods or services of $1 million or more, that the Bidder is not on the Scrutinized Companies with Activities in the Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, and is not engaged in business operations in Cuba or Syria, and that for contracts for goods or services of any amount, that the Bidder is not on the Scrutinized Companies that Boycott Israel List, and is not engaged in a boycott of Israel. Affiant understands that pursuant to Section 287.135, Florida Statutes, the submission of a false certification may subject Bidder to civil penalties, attorney's fees, other costs and termination of any contract that is awarded.

The bid documents contain a General Conditions Section and may, in most cases, contain a Technical Specification Section. General Conditions contain general requirements and Technical Specifications detail the scope of the goods and/or services requested. The Technical Specifications shall always govern whenever there appears to be a conflict.

The Bidder shall comply with the applicable requirements of Federal and state laws, all Codes and Ordinances of the City of Tampa as amended from time to time and any applicable professional regulations.

FURTHER AFFIANT SAYETH NOT.
Bidder: Complete the applicable Acknowledgement for An Individual Acting In His/Her Own Right, A Partnership or A Corporation, according to your firm type.

FOR AN INDIVIDUAL ACTING IN HIS/HER OWN RIGHT

State of _____
County of _____

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization this _____ day of _____ 20____, by _____, who is personally known to me or who has produced identification and who did (did not) take an oath.

_____ Signature of Notary Public

_____ Signature of Affiant

Notary Public
State of: _____
My Commission
Expires: _____

_____ Printed, typed or stamped Commissioned name of notary public

_____ Printed or typed name of Affiant

FOR AN ENTITY

State of FLORIDA
County of LEE

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☑ physical presence or ☐ online notarization this 5 day of APRIL 2021, by LUKE RUSSELL, as VP, of PLAYMORE WEST, INC a ☐ Partnership, ☐ Joint Venture, ☑ Corporation, ☐ Limited Liability Company (LLC) or ☐ Other _____, on behalf of such entity. Such individual is personally known to me or has produced identification.

Type of identification produced: _____

Melissa Vega
Signature of Notary Public

Signature of Affiant

Notary Public
State of: Florida
My Commission
Expires: 9-30-23

MELISSA VEGA
Notary Public - State of Florida
Commission # GG 362320
My Comm. Expires Sep 30, 2023
Bonded through National Notary Assn.

Melissa Vega
Printed, typed or stamped Commissioned name of notary public

LUKE RUSSELL
Printed or typed name of Affiant

BIDDER SUBMITTAL CHECKLIST
BID DOCUMENTS TO BE RETURNED

BID #: 31041421	
BID TITLE: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, AND INSTALLATION, REPAIRS AND REPLACEMENT	
THE FOLLOWING FORMS MUST BE INCLUDED IN BID PACKAGE PLEASE ACKNOWLEDGE BY ANSWERING "YES"	
	YES
Did you sign your bid? *	☑
Did you sign and complete MBD Forms 10 and 20? *	☑
Did you fully complete the price proposal /bid response page? *	☑
Did you complete the Bidder's Affidavit and associated notarized form? *	☑
If an addendum has been issued that changed the Bid Response Page(s), did you provide pricing on the pages marked "Addendum" *	☑
Did you include catalogs, price sheets and or CD's as indicated per Technical Specification? *	☑
Did you include copies of certificates and or licenses as indicated per Technical Specification? *	☑
Did you include pricing for Engineered Fiber Wood Mulch per Technical Specification? *	☑
Did you include Manufacture Specifications as per Technical Specification? *	☑
Did you List pricing based on thickness and color options per Section 11 of the Technical Specifications?*	☑
Is your company name clearly be indicated on the attached price sheet?*	☑

*** Failure to submit these forms shall result in your bid being deemed as "non-responsive".**

Requested Voluntary Information Regarding
Bidder's Initial Employment Application Content

The Bidder's own initial application for employment has criminal history screening practices similar in nature to the practices contained in Chapter 12, Article VI – Criminal History Screening Practices, City of Tampa Code of Ordinances. *(Responses, whether "Yes" or "No", are for informational purposes only and will not be used as a basis of award or denial, nor as a basis for any protest)*: [_] Yes [☑] No

Firm Name: PLAYMORE WEST, INC

Authorized signature: [signature] Date: 4-5-21

ATTACHMENT A - CONFLICT OF INTEREST DISCLOSURE FORM

For purposes of determining any possible conflict of interest, all bidders/proposers, must disclose if any elected or appointed officer of the City of Tampa, City of Tampa employee(s), or any immediate family member* or close personal relation** of an elected or appointed officer of the City of Tampa or City employee(s) is also an owner, corporate officer, agent, employee, stockholder, or has a controlling financial interest***, etc., of their business.

**Immediate family* means spouse, parents and children of the person involved.

***Close personal relationship* means dating, cohabitation, and/or having an intimate sexual relationship. Dating includes but is not limited to casual dating, serious dating, or casual sexual involvement where the parties have no intention of carrying on a long-term relationship, cohabitation, and any other conduct or behavior normally associated with romantic or sexual relationships. This definition applies regardless of the sexual orientation of the employees involved. Persons involved in a close personal relationship shall be referred to as a "close personal relation."

****Controlling financial interest* means ownership, directly or indirectly, to ten (10) percent or more of the outstanding capital stock in any corporation or a direct or indirect interest of ten (10) percent or more in a firm, partnership, or other business entity or such other interest or position in a business entity sufficient to allow him/her or her to control its operations.

Indicate either "yes" (a City employee, elected or appointed official is also associated with your business), or "no". If yes, give person(s) name(s) and position(s) with your business.

YES _____ NO ✓

NAME(S) / POSITION(S)

_____

_____

_____

_____

FIRM NAME: PLAYMORE WEST, INC

BY (PRINTED NAME): LUKE RUSSELL

BY (SIGNATURE): [signature]

TITLE: VP

DATE: 4-5-21

BID RESPONSE FOR
SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT

Please Print or Type PLAYMORE WEST, INC.

We the undersigned, as Bidders, hereby declare that we have carefully read this proposal or bid and the provisions, terms and conditions concerning the equipment, materials, supplies or services as called for, and with full knowledge and understanding of the requirements and conditions, do hereby agree to furnish and to deliver as indicated, FOB, City Facility Location, with all transportation charges prepaid, and for the prices quoted thereon as follows.

I. **Site Furnishings and Playground Equipment**	**Catalog Name**	**Date**	**Discount**
a. Catalog	PLAYWORLD	2021	2
b. Catalog	BERLINER	2021	2
C. Catalog	WABASH VALLEY	2021	2
d. Catalog	EXO FIT	2021	2
e. Catalog	DOG ON IT	2021	2
f. Catalog	CONT... SEE ATTACHED	2021	

If additional space is needed, attach additional pages using headings as indicated above SEE ATTACHED

2. Installation of Site Furnishings, Playground Equipment, Shelters, Shade Structures, Gazebos, and Trellises, Etc. To be based on a firm fixed percentage of the equipment cost (the total cost after discount has been taken, but before freight has been added).	The firm, fixed percentage is 40 % FOR PLAYGROUNDS, SITE FURNISHINGS, FITNESS & DOG EQUIPMENT 180,1' FOR SHADES & SHELTERS
3. Is your written factory certification for the installation of playground equipment attached?	(Yes) No
4. If you are using a subcontractor for the installation of playground equipment list the Certified Installer's Company Name/s:	WE WILL INSTALL Name:
5. Does your company provide repair service?	(Yes) No $ 150 /hour
6. Engineered Wood Fiber Mulch (to include ground preparation and Geotextile separator installation) Is manufacturer's specification data sheet attached?	Yes No $ 4 per Cu. Ft $ 4 per Sq. Ft

Company	Products	Date	Discount	Installation %
Playworld	Playgrounds Site Furnishings Shade Fitness Equipment	2021	2%	40%
Berliner	Playgrounds	2021	2%	40%
Wabash Valley	Site Furnishings	2021	2%	40%
Exo Fit	Fitness Equipment	2021	2%	40%
Dog On It	Dog Park Equipment	2021	2%	40%
USA Shade	Fabric Shades	2021	2%	180%
Shade Systems	Fabric Shades	2021	2%	180%
Apollo Sunguard	Fabric Shades	2021	2%	180%
Superior Shelters	Metal Shelters	2021	2%	180%
Mulch and Soil Co.	Engineered Wood Fiber	2021	See Price Table	See Price Table
Zeager	Engineered Wood Fiber	2021	See Price Table	See Price Table
Robertson Tot Turf	Poured in Place Artificial Turf	2021	See Price Table	See Price Table
No Fault	Poured in Place	2021	See Price Table	See Price Table
X Grass	Poured in Place Artificial Turf	2021	See Price Table	See Price Table
Forever Lawn	Artificial Turf	2021	See Price Table	See Price Table

PLAYMORE WEST, INC

7. Surfacing Products (Poured-In-Place Rubber, Artificial Turf, FlexiPave, Concrete and Brick Pavers) Is price table attached Is manufacturer's specification data sheet attached? Have samples been submitted?	(Yes) (Yes) (Yes)	No No No
8. Have you submitted catalog(s), CD(s) or printed price sheet(s) to be considered as part of this bid? Failure to submit may disqualify your bid.	(Yes)	No
9. Minimum order?	(Yes) If so, $ 4,000	No

10. List any Exclusions:

11. Contact Information:

Name: Luke Russell Phone: 239 791 2400

Cell: 239 340 8184 Email: luker@playmoreonline.com

Firm Name: Playmore West, Inc

Authorized Representative's Name: Luke Russell

Authorized Representative's Title: VP

Address: 10271 Deer Run Farms Rd. Suite 1

City: Ft. Myers State: FL Zip: 33966

Telephone No.: 239 791 2400 Fax No.: 239 791 2401 Email: info@playmoreonline.com

Federal I.D. #: 65-0984408

Type Organization: [ ] Individual [ ] Small Business [ ] Non-Profit [ ] LLC
[ ] Partnership [✓] Corporation [ ] Joint Venture

Business is licensed (unless exempt by applicable law), permitted and certified to do business in the State of Florida:
[✓] Yes [ ] No License # CBC1252224, CEE00-0003596, Ft. Myers BUS-2006-50155

Minority Business Status: [ ] Black [ ] Hispanic [ ] Woman [ ] Other

Is your business certified as a minority business with any government agency? [ ] Yes [✓] No. If yes, please list below:

Agency Name	Certification Number	Expiration Date

Sub-Contracting Submittals required: Forms MBD-10, MBD-20 must be submitted with the bid/proposal.

By signing this bid the Bidder complies with all of the requirements of the bid including but not limited to Communication Policy and City of Tampa Ethics Code contained in Section 4 of the GENERAL CONDITIONS.

Authorized Signature: [signature] Date: 4-5-21

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules
City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)
(FORM MBD-10)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421

Company Name: PLAYMORE WEST, INC Address: 10271 DEER RUN FARMS RD, SUITE 1 FT. MYERS, FL 33966

Federal ID: 65-0984408 Phone: 239 791 2400 Fax: 239 791 2401 Email: info@playmoreonline.com

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.

[X] **No Firms were contacted or solicited for this contract.**

[ ] **No Firms were contacted because:** _____

[ ] **See attached list of additional Firms solicited and all supplemental information (List must comply to this form)**

Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=WMBE O = Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N

Failure to Complete, Sign and Submit this form with your Bid or Proposal Shall render the Bid Non-Responsive (Do Not Modify This Form)

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub–contracting opportunities on this contract.

Signed: _____ Name/Title: LUKE RUSSELL VP Date: 4-5-21

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

MBD 10 rev./effective 02/2016

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 3 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421

Company Name: PLAYMORE WEST, INC Address: 10271 DEER RUN FARMS RD, SUITE I FT. MYERS, FL 33966

Federal ID: 65-0984408 Phone: 239 791 2400 Fax: 239 791 2401 Email: info@playmoreonline.com

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

[ ] See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)
Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

[✓] No Subcontracting/consulting (of any kind) will be performed on this contract.

[ ] No Firms are listed to be utilized because: _____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=WMBE O =Neither Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %

Failure to Complete, Sign and Submit this form with your Bid or Proposal Shall render the Bid Non-Responsive. (Do Not Modify This Form)

Total ALL Subcontract / Supplier Utilization $ _____

Total SLBE Utilization $ _____

Total WMBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. _____**%** **Percent WMBE Utilization of Total Bid/Proposal Amt.** _____**%**

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: _____ Name/Title: LUKE RUSSELL VP Date: 4-5-21

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

MBD 20 rev./effective 02/2016

Ron DeSantis, Governor

Halsey Beshears, Secretary

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

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

RUSSELL, RYAN JAMES

PLAYMORE RECREATIONAL PRODUCTS AND SERVICES
10271 DEER RUN FARMS RD - STE 1
FORT MYERS FL 33966

LICENSE NUMBER: CBC1252224

EXPIRATION DATE: AUGUST 31, 2022

Always verify licenses online at MyFloridaLicense.com

Do not alter this document in any form.

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

State of Florida
Department of State

I certify from the records of this office that PLAYMORE WEST, INC. is a corporation organized under the laws of the State of Florida, filed on February 10, 2000.

The document number of this corporation is P00000016534.

I further certify that said corporation has paid all fees due this office through December 31, 2020, that its most recent annual report/uniform business report was filed on January 23, 2020, and that 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 Twenty-third day of January, 2020



Secretary of State

Tracking Number: 6239441346CC

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

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

2020 - 2021
LEE COUNTY LOCAL BUSINESS TAX RECEIPT

Account Number: 0003596

Account Expires: September 30, 2021

Location:
10271 DEER RUN FARMS RD STE 1
FT MYERS FL 33966

PLAYMORE RECREATIONAL PRODUCTS & SERVICE
PLAYMORE WEST INC
10271 DEER RUN FARMS RD STE 1
FT MYERS FL 33966

May engage in the business of:

DISTRIBUTOR / MOBILE SALES

Selling on roadsides is prohibited

THIS LOCAL BUSINESS TAX RECEIPT IS NON REGULATORY

Payment Information:

PAID 558479-350-1 07/17/2020 02:17 PM
$50.00

CITY OF FORT MYERS FLORIDA
Business Tax Receipt
2020 - 2021

Effective 8/5/2020 For Receipt Year October 1, 2020 through September 30, 2021

10271 DEER RUN FARMS RD 1

PLAYMORE RECREATIONAL
Business Tax #: BUS2006-50155

is hereby registered* business, profession, or occupation of:

ADMINISTRATOR (BUSINESS ADMINISTRATOR)

ALCOHOL SALES PERMITTED: NO ***HOMEBASED: NO***

Owner: PLAYMORE WEST INC, 10271 DEER RUN FARMS RD #1, FT MYERS FL 33966

***Any violation of applicable chapter of the City Code Of Ordinances will cancel and nullify this receipt**

Dear Business Owner:

The City of Fort Myers wishes you success with your business. The Business Tax Receipt below is

NATIONAL PLAYGROUND CONTRACTORS ASSOCIATION INC.

NPCAI

QUALIFIED CONTRACTOR

Member ID#

2004-1029

Certificate of Playground Contractor Qualification

This certificate validates that the company below is listed as a Qualified Playground Contractor and a Member of the NPCAI and has the necessary requirements to conduct business.

Playmore Recreational Products & Services

Fort Myers, FL

This Certificate is valid until the date of

09/30/2021

Edward Miller, Jr., NPCAI Chairman — 10/16/2020 Date

Denise R. Calabrese, NPCAI Executive Director — 10/16/2020 Date

NPCAI

NATIONAL PLAYGROUND CONTRACTORS ASSOCIATION INC.

PLAYWORLD

March 23, 2021

RE: Sole Source Letter

To Whom it May Concern:
This letter is to confirm that Playmore Recreational Products and Services is the exclusive authorized contracted sales representative for Playworld in the state of Florida. Further, they are the exclusive agency to design, sell and install our equipment.

If I can be of further assistance, please do not hesitate to contact me directly.

Sincerely,



Kristi M. Teats
Customer Service Manager
Playworld
kristit@playworld.com
570-522-5447

Berliner
Play equipment for life

Berliner
Play Equipment Corporation
96 Brookfield Oaks Drive
Greenville, SC 29607

Phone +1.864.627.1092
Fax +1.864.627.1178
info@berliner-playequipment.com

www.berliner-playequipment.com

4/14/2020

To Whom it may concern:

Please accept this letter of authorization that Playmore Recreational Products and Services is the exclusive dealer in the state of FL to sell *Berliner* and *Urban Design Berlin* products.

Please don't hesitate to contact us with any questions.

Best regards,

Kevin M Rambaud

Kevin M. Rambaud
Regional Sales Director
Berliner

PlayPower
Inspiring the world to play.

April 7, 2020

To Whom It May Concern:

Please let this letter serve notice that **Playmore Recreational Products and Services**, is an authorized sales and service representative of the Wabash Valley, Urbanscape and Green Valley product lines in the State of Florida.

If you have any questions, please feel free to contact me at 1-813-760-0382.

Respectfully,

Dan Sullivan
National Sales Manager MSP
Daniel.sullivan@playpower.com
WABASHVALLEY MFG., INC.

WABASH VALLEY

HAGS Miracle PLAYWORLD soft play USASHADE VPS WABASH VALLEY

ExoFit
Outdoor Fitness

April 7, 2020

To Whom it May Concern,

This letter confirms that Playmore Recreational Products and Services is certified to sell and install ExoFit Outdoor Fitness Equipment.

Sincerely,

Daniel Flesher
President, ExoFit Outdoor Fitness

DOG·ON·IT PARKS

DOG-ON-IT-PARKS.COM

April 10, 2020

To Whom It May Concern,

Please accept this letter as confirmation that Playmore Recreational Products and Services is an authorized distributor for Dog-ON-It-Parks and is approved to sell, distribute and install our products. They have been a trusted dealer of ours for many years.

Should you have any additional questions, please don't hesitate to contact me.

Sincerely,

Nora VandenBerghe

Sales, Marketing & Operations Manager

Dog-ON-It-Parks 4818 Evergreen Way, Ste 250 Everett, WA 98203
P: 877-348-3647 F: 425-347-3056 E: sales@dogonitparks.com

USASHADE
& Fabric Structures

USA Headquarters
DFW International Commerce Park
2580 Esters Blvd., Suite 100
DFW Airport, TX 75261
FedEx and UPS Shipments

Mailing Address
P.O. Box 3467
Coppell, TX 75019
US Postal Service

April 7, 2020

To Whom It May Concern:

It is our pleasure to inform you that Playmore Recreational Products and Services is a certified independent sales rep firm and installer of USA Shade and Fabric Structures.

Sincerely,

Whitney Klen

Whitney Klen
National Sales Manager
Independent Reps and National Accounts
USA Shade and Fabric Structures, Inc.

Shade systems INC
4150 S.W. 19th Street • Ocala, FL 34474
Tel.: 352/237-0135 · TOLL-FREE: 1-800-609-6066 · FAX: 352/237-2256
E-mail: info@shadesystemsinc.com • Web: www.shadesystemsinc.com

October 20, 2019

To Whom It May Concern:

Playmore Recreational Products and Services is an authorized distributor of Shade Systems in the state of Florida. Furthermore, Playmore Recreational Products and Services can provide installation of our products.

If there is need of additional information, please feel free to contact me.

Sincerely,

Margo Ross
Customer Service Manager
Shade Systems, Inc.

A Service Disabled Veteran Owned Small Business!

July 13, 2020

To Whom It May Concern:

This letter is to inform you that Playmore Recreational Products & Services is an authorized distributor and installer of Apollo Sunguard Systems, Inc. shade products throughout the entire State of Florida.

Sincerely,

Danielle Cibello

Danielle Cibello
Vice President of Sales

Apollo Sunguard Systems, Inc.
4487 A Ashton Road, Sarasota, Florida 34233
Toll Free: (800) 319-1010 Phone: (941) 925-3000 Fax: (941) 925-3001
www.apollosunguard.com

SUPERIOR
RECREATIONAL PRODUCTS

4/8/2020

PLAYMORE Recreational Products & Services

To whom it concerns,

This letter serves to endorse PLAYMORE Recreational Products & Services as a factory certified distributer for SRP Shelter in the state of Florida. SRP Shelter has been providing customers with standard and custom shelter solutions for outdoor location for over 15 years. Based in Carrollton, GA; our line of shade and shelter products deliver creative solutions and unique designs while providing protection from the sun's harmful UV rays and high winds. Our years of experience allows us to provide the superior products you've been searching for.

If anything else is needed or any questions remain please contact me anytime.

Regards,

Brent Derbecker
Brand Manager Shade & Shelters
Superior Recreational Products

770.832.6660
1050 Columbia Drive
Carrollton, GA 30117
SRPshade.com

7/22/2020

To whom it may concern:

Playmore West is currently a customer of The Mulch and Soil Company and they are authorized to sell and install our materials.

Please note that the Mulch and Soil Company is currently operating under Forestry Resources, LLC as well.

Sincerely –

Kristine Magee

Customer Service Manager

The Mulch and Soil Company

Phone: 239.334.7272

ZEAGER
EST. 1967

Quality, Integrity & Innovation.

April 8, 2020

To whom this may concern,

Playmore Recreational Products and Services. is authorized to sell and install all products manufactured by Zeager Bros., Inc. including: WOODCARPET® premium engineered wood fiber, Bonded WoodCarpet®, WoodCarpet® Geotextile Fabric, WoodCarpet® Resilient Drainage panels, RECBASE® resilient foam base, RECBASE Synthetic Grass, and TUFFMATS® .

Sincerely,
Scott M. Merchlinski
Sales Manager
Zeager Bros., Inc.

Main Office
Phone 800-346-8524
Fax 717-944-7681
info@zeager.com

zeager.com

Lower & Upper Midwest
Phone 800-296-9227
Fax 270-586-4493
zhc@zeager.com

Robertson
Recreational Surfaces
A PLAYCORE company

April 7, 2020

To Whom It May Concern:

Playmore Recreational Products and Services are authorized to sell all Totturf products which will be installed by Robertson trained and certified crews.

Please let me know if you need anything else.
Thank you,

Richard Hawley

Richard Hawley, VP of Sales
Robertson Industries, Inc

Corporate Office: 2414 W. 12th Street, Suite 5 - Tempe, AZ 85281
Toll Free: (800) 858.0519 - Fax: (602) 340-0402
www.totturf.com

04/13/2020

To Whom It May Concern,

Playmore Recreational Products and Services is an authorized distributor of No Fault LLC products. Furthermore, Playmore Recreational Products and Services can provide certified installation of our products.

Please feel free to contact me with any additional questions concerning Playmore Recreational Products and Services, as it pertains to the distribution of our products.
Sincerely,

Jay Ratelle
President
NO FAULT, LLC

April 9, 2020

To Whom It May Concern,

Playmore Recreational Products and Services is an authorized distributor of XGRASS synthetic turf products. Furthermore, Playmore Recreational Products and Services can provide certified installation of our products.

Please feel free to contact me with any additional questions concerning Playmore Recreational Products and Services, as it pertains to the distribution of our products.

Sincerely,

Will Lambert

Vice President of Business Development

205 Boring Drive
Dalton, GA 30721

t: 706 272 0140 · 877 881 8477
f: 706 529 0849 e: customerservice@xgrass.com

www.xgrass.com

5801 Mayfair Rd., Suite 4
North Canton, Ohio 44720
866.992.7876

To Whom It May Concern:

Playmore Recreational Products & Services is an authorized supplier and installer of ForeverLawn products, including ForeverLawn Playground Grass.

If you have any questions or need additional documentation, please don't hesitate to contact us.

Kind Regards,

Derek Taylor
ForeverLawn, Inc.
5801 Mayfair Rd., Suite 4
North Canton, OH 44720
330.499.8873

Rap

BIDDER'S AFFIDAVIT

Before me, the undersigned authority who is duly authorized by law to administer oaths and take acknowledgements, personally appeared

Nathan Almon, President

AFFIANT'S NAME (PERSON'S NAME)

Who, after being duly cautioned and sworn, and being fully aware of the penalties of perjury, does hereby depose and declare, on his/her own behalf or as a representative on behalf of a partnership or corporation, or other entity that is the Bidder in the matter at hand, as follows:

1. That the Bidder, if a natural person, is of lawful age.

2. That if the Bidder is a partnership, or a corporation, or other legal person or entity recognized in the State of Florida, it has complied with all laws and ordinances governing the formation and continued existence of such entities, including but not limited to, if a Florida corporation, to the filing of its Articles of Incorporation with the Florida Secretary of State and if a corporation incorporated under the laws of a state other than Florida, that it is duly authorized to do business in the State of Florida; that it is currently an active corporation or entity fully authorized to do business; and that the undersigned is representative of the corporation or entity authorized to make this affirmation and declaration and who has the power to bind said corporation or entity.

3. That if the Bidder is operating under a fictitious name, Bidder has currently complied with and any and all laws and procedures governing the operation of businesses under fictitious names in the State of Florida;

4. That the Bidder has not submitted a rigged Bid, nor engaged in collusive bidding, or a collusive bidding arrangement, or fraudulent bidding, or entered into a conspiracy in connection with this bid with any other natural person, partnership, corporation or other entity making a bid for the same purpose. The Bidder has not entered into any understanding or agreement with any other person or entity where one or more such persons or entities agrees not to bid or fixing the prices to be bid.

5. In the event that the City determines that the Bidder has participated in any collusive, deceptive or fraudulent practices in derogation of the statements in this Affidavit the City, in addition to any other remedy it may exercise, will have the right to debar the Bidder. The contract let under such circumstances shall be deemed invalid.

6. That the Bidder is not in arrears to the City of Tampa upon debt or contract and is not in default, as surety or otherwise, of any obligation to the City, Hillsborough County or the State of Florida

7. That no officer or employee of the City, either individually or through any firm, corporation or business of which he/she is a stockholder or holds office, shall receive any substantial benefit or profit out of the contract or award to this Bidder; nor does the Bidder know of any City officer or employee having any financial interest in assisting the Bidder to obtain, or in any other way effecting, the award of the contract to this Bidder.

8. That, by submitting this bid, the Bidder certifies that he/she has fully read and understands the bid method and has full knowledge of the scope, nature, and quality of work to be performed or the services to be rendered.

9. That, by submitting this Bid, Affiant certifies compliance with Section 287.135, Florida Statutes and for contracts for goods or services of $1 million or more, that the Bidder is not on the Scrutinized Companies with Activities in the Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, and is not engaged in business operations in Cuba or Syria, and that for contracts for goods or services of any amount, that the Bidder is not on the Scrutinized Companies that Boycott Israel List, and is not engaged in a boycott of Israel. Affiant understands that pursuant to Section 287.135, Florida Statutes, the submission of a false certification may subject Bidder to civil penalties, attorney's fees, other costs and termination of any contract that is awarded.

The bid documents contain a General Conditions Section and may, in most cases, contain a Technical Specification Section. General Conditions contain general requirements and Technical Specifications detail the scope of the goods and/or services requested. The Technical Specifications shall always govern whenever there appears to be a conflict.

The Bidder shall comply with the applicable requirements of Federal and state laws, all Codes and Ordinances of the City of Tampa as amended from time to time and any applicable professional regulations.

FURTHER AFFIANT SAYETH NOT.
Bidder: Complete the applicable Acknowledgement for An Individual Acting In His/Her Own Right, A Partnership or A Corporation, according to your firm type.

FOR AN INDIVIDUAL ACTING IN HIS/HER OWN RIGHT

State of _____
County of _____

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization this _____ day of _____ 20____, by _____, who is personally known to me or who has produced identification and who did (did not) take an oath.

_____
Signature of Notary Public

_____
Signature of Affiant

Notary Public
State of: _____
My Commission
Expires: _____

_____
Printed, typed or stamped
Commissioned name of notary public

_____
Printed or typed name of Affiant

FOR AN ENTITY

State of Florida
County of Seminole

The foregoing instrument was sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or ☐ online notarization this 12th day of April 2021, by Nathan Almon, as President, of Rep Services, Inc. a ☐ Partnership, ☐ Joint Venture, ☒ Corporation, ☐ Limited Liability Company (LLC) or ☐ Other _____, on behalf of such entity. Such individual is personally known to me or has produced identification.

Type of identification produced: _____

Katie E. Grabenau
Signature of Notary Public

Signature of Affiant

KATIE E GRABENAU
Notary Public - State of Florida
Commission # GG 330390
My Comm. Expires May 2, 2023
Bonded through National Notary Assn.

Notary Public
State of: Florida
My Commission
Expires: 5-2-2023

Katie E. Grabenau
Printed, typed or stamped
Commissioned name of notary public

Nathan Almon
Printed or typed name of Affiant

BIDDER SUBMITTAL CHECKLIST
BID DOCUMENTS TO BE RETURNED

BID #: 31041421	
BID TITLE: PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, AND INSTALLATION, REPAIRS AND REPLACEMENT	
THE FOLLOWING FORMS MUST BE INCLUDED IN BID PACKAGE PLEASE ACKNOWLEDGE BY ANSWERING "YES"	
	YES
Did you sign your bid? *	
Did you sign and complete MBD Forms 10 and 20? *	
Did you fully complete the price proposal /bid response page? *	
Did you complete the Bidder's Affidavit and associated notarized form? *	
If an addendum has been issued that changed the Bid Response Page(s), did you provide pricing on the pages marked "Addendum" *	
Did you include catalogs, price sheets and or CD's as indicated per Technical Specification? *	
Did you include copies of certificates and or licenses as indicated per Technical Specification? *	
Did you include pricing for Engineered Fiber Wood Mulch per Technical Specification? *	
Did you include Manufacture Specifications as per Technical Specification? *	
Did you List pricing based on thickness and color options per Section 11 of the Technical Specifications? *	
Is your company name clearly be indicated on the attached price sheet?*	

*** Failure to submit these forms shall result in your bid being deemed as "non-responsive".**

Requested Voluntary Information Regarding
Bidder's Initial Employment Application Content

The Bidder's own initial application for employment has criminal history screening practices similar in nature to the practices contained in Chapter 12, Article VI – Criminal History Screening Practices, City of Tampa Code of Ordinances. *(Responses, whether "Yes" or "No", are for informational purposes only and will not be used as a basis of award or denial, nor as a basis for any protest)*: [X] Yes [_] No

Firm Name: Rep Services, Inc.

Authorized signature: _____ Date: 4/10/2021

ATTACHMENT A - CONFLICT OF INTEREST DISCLOSURE FORM

For purposes of determining any possible conflict of interest, all bidders/proposers, must disclose if any elected or appointed officer of the City of Tampa, City of Tampa employee(s), or any immediate family member* or close personal relation** of an elected or appointed officer of the City of Tampa or City employee(s) is also an owner, corporate officer, agent, employee, stockholder, or has a controlling financial interest***, etc., of their business.

**Immediate family* means spouse, parents and children of the person involved.

***Close personal relationship* means dating, cohabitation, and/or having an intimate sexual relationship. Dating includes but is not limited to casual dating, serious dating, or casual sexual involvement where the parties have no intention of carrying on a long-term relationship, cohabitation, and any other conduct or behavior normally associated with romantic or sexual relationships. This definition applies regardless of the sexual orientation of the employees involved. Persons involved in a close personal relationship shall be referred to as a "close personal relation."

****Controlling financial interest* means ownership, directly or indirectly, to ten (10) percent or more of the outstanding capital stock in any corporation or a direct or indirect interest of ten (10) percent or more in a firm, partnership, or other business entity or such other interest or position in a business entity sufficient to allow him/her or her to control its operations.

Indicate either "yes" (a City employee, elected or appointed official is also associated with your business), or "no". If yes, give person(s) name(s) and position(s) with your business.

YES _____ NO _No_

NAME(S) / POSITION(S)

_____

_____

_____

_____

FIRM NAME: Rep Services, Inc.

BY (PRINTED NAME): Nathan Almon

BY (SIGNATURE): _____

TITLE: President

DATE: 4/10/2021

BID RESPONSE FOR
SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT

Please Print or Type

We the undersigned, as Bidders, hereby declare that we have carefully read this proposal or bid and the provisions, terms and conditions concerning the equipment, materials, supplies or services as called for, and with full knowledge and understanding of the requirements and conditions, do hereby agree to furnish and to deliver as indicated, FOB, City Facility Location, with all transportation charges prepaid, and for the prices quoted thereon as follows.

I. Site Furnishings and Playground Equipment	**Catalog Name**	**Date**	**Discount**
a. Catalog	Landscape Structures, Inc. Play, Shade and Water	Jan 2021	2%
b. Catalog	TotTurf Surfacing	2019	2%
C. Catalog	Poligon Steel, Wood, Fabric	2014	2%
d. Catalog	DuMor Site Furniture Catalog	Jan 2021	2%
e. Catalog	Vitriturf Safety Surfacing Catalog	2017	2%
f. Catalog	ForeverLawn	2016	2%
g. Catalog	Engineered Wood Fiber Mulch	N/A	2%

If additional space is needed, attach additional pages using headings as indicated above

2. Installation of Site Furnishings, Playground Equipment, Shelters, Shade Structures, Gazebos, and Trellises, Etc. To be based on a firm fixed percentage of the equipment cost (the total cost after discount has been taken, but before freight has been added).	The firm, fixed percentage is 75 %
3. Is your written factory certification for the installation of playground equipment attached?	(Yes) No
4. If you are using a subcontractor for the installation of playground equipment list the Certified Installer's Company Name/s:	Name: 1. Johnny Pitts Construction, Inc. 2. Al Bosgraff & Sons
5. Does your company provide repair service?	(Yes) No $ N/A /hour
6. Engineered Wood Fiber Mulch (to include ground preparation and Geotextile separator installation) Is manufacturer's specification data sheet attached?	Yes (No) $_____ per Cu. Ft $_____ per Sq. Ft

7. Surfacing Products (Poured-In-Place Rubber, Artificial Turf, FlexiPave, Concrete and Brick Pavers) Is price table attached Is manufacturer's specification data sheet attached? Have samples been submitted?	(Yes) (Yes) Yes	No No (No)
8. Have you submitted catalog(s), CD(s) or printed price sheet(s) to be considered as part of this bid? Failure to submit may disqualify your bid.	(Yes)	No
9. Minimum order?	Yes If so, $_____	(No)
10. List any Exclusions: N/A		
11. Contact Information: Name: Scott Brushwood Phone: 727.539.8457 Cell: 813.294.7325 Email: scott@repservices.com		

Firm Name: Rep Services, Inc.

Authorized Representative's Name: Nathan Almon

Authorized Representative's Title: President

Address: 165 W Jessup Ave

City: Longwood State: FL Zip: 32750-4146

Telephone No.: 407.831.9658 Fax No.: 866.232.8532 Email: sales@repservices.com

Federal I.D. #: 59-2978507

Type Organization: [ ] Individual [ ] Small Business [ ] Non-Profit [ ] LLC
[ ] Partnership [X] Corporation [ ] Joint Venture

Business is licensed (unless exempt by applicable law), permitted and certified to do business in the State of Florida:
[X] Yes [ ] No License # 21-01733

Minority Business Status: [ ] Black [ ] Hispanic [ ] Woman [ ] Other

Is your business certified as a minority business with any government agency? [ ] Yes [X] No. If yes, please list below:

Agency Name	Certification Number	Expiration Date

Sub-Contracting Submittals required: Forms MBD-10, MBD-20 must be submitted with the bid/proposal.

By signing this bid the Bidder complies with all of the requirements of the bid including but not limited to Communication Policy and City of Tampa Ethics Code contained in Section 4 of the GENERAL CONDITIONS.

Authorized Signature: Date: 04/10/2021

Tampa

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 1 of 4 – DMI Solicited/Utilized Schedules
City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers)
(FORM MBD-10)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421
Company Name: Rep Services, Inc. Address: 165 W Jessup Ave, Longwood, FL 32750-4146
Federal ID: 59-2978507 Phone: 407.831.9658 Fax: 866.232.8532 Email: sales@repservices.com

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.
[x] **No Firms were contacted or solicited for this contract.**
[ ] **No Firms were contacted because:**
[ ] **See attached list of additional Firms solicited and all supplemental information (List must comply to this form)**
Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

NIGP Code Categories. Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

S = SLBE W=WMBE O = Neither / Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services / NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N
O / 56-2401784	Johnny Pitts Construction, Inc. 4124 Pace Lane Milton, FL 32571	F/M	Installer	E	Y
O / 59-2084524	Al Bosgraaf & Sons, Inc. 240 Rebel Run Osteen, FL 32764-9335	F/M	Installer	E	Y

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub-contracting opportunities on this contract.

Signed: Nathan Almon Name/Title: Nathan Almon, President Date: 4/10/2021

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive
Forms must be included with Bid / Proposal

MBD 10 rev./effective 02/2016

Tampa

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Page 3 of 4 – DMI Solicited/Utilized Schedules

City of Tampa – Schedule of All To-Be-Utilized Sub-(Contractors/Consultants/Suppliers)

(FORM MBD-20)

Contract No.:21-P-00417 Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421

Company Name: Rep Services, Inc. Address: 165 W Jessup Ave, Longwood, FL 32750-4146

Federal ID: 59-2978507 Phone: 407.831.9658 Fax: 866.232.8532 Email: sales@repservices.com

Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.

[ ] See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)

Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses

[x] No Subcontracting/consulting (of any kind) will be performed on this contract.

[ ] No Firms are listed to be utilized because: _____

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise, "O" for Other Non-Certified

S = SLBE W=WMBE O =Neither / Federal ID	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials / NIGP Code Listed above	$ Amount of Quote. Letter of Intent (LOI) if available	Percent of Scope or Contract %
O / 56-2401784	Johnny Pitts Construction, Inc. 4124 Pace Lane Milton, FL 32571 Phone: 850-994-9749 Fax: 850-983-1386 johnny@jpconstructs.com	F/M	Installer	E	Y
O / 59-2084524	Al Bosgraaf & Sons, Inc. 240 Rebel Run Osteen, FL 32764-9335 Phone:407-402-8497 Fax: 407-386-6193 albandsons@gmail.com	F/M	Installer	E	Y

Total ALL Subcontract / Supplier Utilization $_____

Total SLBE Utilization $ _____

Total WMBE Utilization $ _____

Percent SLBE Utilization of Total Bid/Proposal Amt. ____% Percent WMBE Utilization of Total Bid/Proposal Amt. ____%

It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this Contract.

Signed: _____ Name/Title: Nathan Almon, President Date: 4/10/2021

Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

Forms must be included with Bid / Proposal

MBD 20 rev /effective 02/2016

City of Tampa – DMI Sub-(Contractors/Consultants/Suppliers) Payments [ ] Partial [ ] Final

Contract No.: 21-C-00417 WO#,(if any)_____ Contract Name: Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement Bid #3101421
Contractor Name: Rep Services, Inc. Address 165 W Jessup Ave, Longwood, FL 32750-4146
Federal ID 59-2978507 Phone 407.831.9658 Fax 866.232.8532 Email sales@repservices.com
GC Pay Period Net 30 Payment Request/Invoice Number:_____ City Department: _____
Total Amount Requested for pay period:_____ Total Contract Amount(including change orders):_____

Type of Ownership - (F=Female M=Male), BF BM = African Am., HF HM = Hispanic Am., AF AM = Asian Am., NF NM = Native Am., CF CM = Caucasian S = SLBE

Type Trade/Work Activity []Sub []Supplier Federal ID	Company Name Address Phone & Fax	Total Sub Contract Or PO Amount	Amount Paid To Date Amount Pending Previously Reported	Amount To Be Paid For This Period Sub Pay Period Ending Date
F/M Installer Sub 56-2401784	Johnny Pitts Construction, Inc. 4124 Pace Lane Milton, FL 32571 Phone: 850-994-9749 Fax: 850-983-1386		$	$
F/M Installer Sub 59-2084524	Al Bosgraaf & Sons, Inc. 240 Rebel Run Osteen, FL 32764-9335 Phone:407-402-8497 Fax: 407-386-6193		$	$
			$	$
			$	$
			$	$
			$	$

Certification: I hereby certify that the above information is a true and accurate account of payments to sub – contractors/consultants on this contract.

Signed _____ Name/Title Nathan Almon, President Date: 4/10/2021

(Modifying This Form or Failure to Complete and Sign May Result in Non-Compliance)

DMI form 30 (rev. 03/12/10) Pg __ of __ [ ] See attached for additional information.

ATTACHMENT B

	A	B	C
1		**ATTACHMENT B - PRODUCTS LIST**	
2	**PRODUCTS**	**TYPE**	**MANF. NAME**
3	Benches	**PLAYGROUND & FITNESS EQUIPMENT**	
4	Trash Receptacles	650.12, 650.18	Landscape Structures
5	Bike Racks	650.38, 650.54	Gametime
6	Bollards	650.60, 650.72	Kompan
7	Picnic Tables	650.60, 650.72	Berliner Seilfabrik
8	Bike Repair Station		
9	Play Equipment		
10	-Play Structure	**PLAY SURFACING -**	**MANUFACTURER** D
11	-Free Standing		GT Impax PIP
12	Safety Surfacing	650.5	Vitriturf PIP
13	-PIP		LS Pebble Flex
14	-Eng. Wood Fiber		Surface America PIP
15	-Play Turf		Fibar
16	Dog Waste Station		KorKat
17	Pavers		Forever Lawn
18	- brick		
19	- concrete		Innovative Sports Surfacing
20	Flexi Pave		
21	Shade Structure		
22	-fabric sails		
23	-hard roof	**SITE FURN:**	
24	Turf Support Mtls.		**MANUFACTURER**
25	Perma Trak		Du Mor
26		Comm Codes	Victor Stanley
27		650.06	Anova Furnishings, Inc.
28		650.1	Landscape Forms
29		650.24	Keystone Ridge Designs, Inc.
30		650.36	Kay Park
31		650.38	Belson Outdoors
32			Wabash Valley
33			The Park Catalog
34		120.27	Wausau Tile
35			Namco DoggyDo Station
36			iron Age Designs
37			Ironsmith, Inc.
38			Dura Art Stone
39			Creative Systems-Landscape Brands
40			Park Warehouse
41			mmcite7 LLC
42			Forms + Surfaces
43			
44		**SHADE STRUCTURES & GAZEBO**	
45			**MANUFACTURERS**

ATTACHMENT B

	A	B	C
46			Poligon
47			Shade Systems
48			Appollo Sunguard
49			USA Shade
50			Classic Recreation Systems
51			Tensile Shade Products
52			
53		**MISCELLANEOUS PRODUCTS / MATERIALS**	
54			**MANUFACTURERS**
55			PermaLoc
56			Grass Pave
57			FlexiPave
58			PermaTrak
59			Trex Company, Inc.
60			Geo Block
61			Oldcastle
62			Keystone
63			Pine Hall Brick
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ATTACHMENT B

	D	E
1		
2	**DETAILS**	**DISCOUNT %**
3		
4	Play structures & Free Stdg. Pieces	
5	Play structures & Free Stdg. Pieces	
6	Play structures & Free Stdg. Pieces	
7	Play structures & Free Stdg. Pieces	
8		
9		
10	**ETAILS**	
11	Rubber & Engineered wood fiber	
12	Rubber Poured In Place (PIP)	
13	Rubber PIP	
14	Rubber PIP	
15	Eng. Wood Fiber / Rubber PIP	
16	Rubber PIP, Eng. Wood Fiber, Bonded Rubber, Rubber Mulch, Artificial	
17	Artificial Playground Turf	
18		
19	Rubber PIP, Artificial Turf, Court Surface Repair	
20		
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45	**DETAILS**	

ATTACHMENT B

	D	E
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53	**ETAILS**	
54		
55	Metal edging	
56	Turf support	
57	Alt. tree grate / paving	
58	Boardwalk system	
59	Decking	
60	Turf support	
61	Block walls	
62	Block walls	
63	Brick Pavers	
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 7/30/2024

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
Alexander Insurance Agency
541 South Orlando Avenue, Suite 206
Maitland FL 32751

License#: L029632

CONTACT NAME: Jennifer Vann
PHONE (A/C, No, Ext): 407-629-4825 **FAX (A/C, No):** 407-629-5407
E-MAIL ADDRESS: info@alexfinancial.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Evanston Insurance Company	35378
INSURER B : Travelers Indemnity Co of Amer	25666
INSURER C : Ohio Casualty Company	24074
INSURER D : Sentinel Ins. Co., LTD	11000
INSURER E : Hartford Insurance Co of SE	38261
INSURER F : Lloyd's of London	

INSURED
Rep Services, Inc.
165 West Jessup Ave
Longwood FL 32750-4146

REPSERV-01

COVERAGES **CERTIFICATE NUMBER:** 1032293979 **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	
E	X COMMERCIAL GENERAL LIABILITY	Y	Y	21SBMBK3355	8/1/2024	8/1/2025	EACH OCCURRENCE	$ 1,000,000
	[ ] CLAIMS-MADE [X] OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 500,000
	X BUSINESS OWNERS						MED EXP (Any one person)	$ 10,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY	$ 1,000,000
	[ ] POLICY [X] PRO-JECT [ ] LOC						GENERAL AGGREGATE	$ 2,000,000
	OTHER:						PRODUCTS - COMP/OP AGG	$ Below
								$
D	AUTOMOBILE LIABILITY	Y	Y	21UECHV0794	8/1/2024	8/1/2025	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	X ANY AUTO						BODILY INJURY (Per person)	$
	[ ] OWNED AUTOS ONLY [ ] SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
A	[ ] UMBRELLA LIAB [X] OCCUR	Y	Y	MKLV3EUL103353	8/1/2024	8/1/2025	EACH OCCURRENCE	$ 5,000,000
	X EXCESS LIAB [ ] CLAIMS-MADE						AGGREGATE	$ 5,000,000
	DED [X] RETENTION $ 10,000							$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N	N / A	Y	UB-3J747620-24-42-G	8/1/2024	8/1/2025	X PER STATUTE [ ] OTH-ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? [N] (Mandatory in NH)						E.L. EACH ACCIDENT	$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000
C	INLAND MARINE			BMO60331810	8/1/2024	8/1/2025	JOB LIMIT	$250,000
F	ERRORS & OMMISSIONS			ANE1939938.24	8/1/2024	8/1/2025	CLAIM/AGGREGATE	$2000000/$2000000
A	GL - Products Completed			MKLV3PBC003347	8/1/2024	8/1/2025	OCCURRENCE/AGGREGATE	$1000000/$2000000

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

CERTIFICATE HOLDER

City of Tampa
306 E. Jackson Street
Tampa FL 33602
USA

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



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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 7/30/2024

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
Alexander Insurance Agency
541 South Orlando Avenue, Suite 206
Maitland FL 32751

License#: L029632

CONTACT NAME: Jennifer Vann
PHONE (A/C, No, Ext): 407-629-4825 **FAX (A/C, No):** 407-629-5407
E-MAIL ADDRESS: info@alexfinancial.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Evanston Insurance Company	35378
INSURER B : Travelers Indemnity Co of Amer	25666
INSURER C : Ohio Casualty Company	24074
INSURER D : Sentinel Ins. Co., LTD	11000
INSURER E : Hartford Insurance Co of SE	38261
INSURER F : Lloyd's of London	

INSURED
Rep Services, Inc.
165 West Jessup Ave
Longwood FL 32750-4146
REPSERV-01

COVERAGES **CERTIFICATE NUMBER:** 943199119 **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	
E	X COMMERCIAL GENERAL LIABILITY	Y	Y	21SBMBK3355	8/1/2024	8/1/2025	EACH OCCURRENCE	$ 1,000,000
	[ ] CLAIMS-MADE [X] OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 500,000
	X BUSINESS OWNERS						MED EXP (Any one person)	$ 10,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY	$ 1,000,000
	[ ] POLICY [X] PRO-JECT [ ] LOC						GENERAL AGGREGATE	$ 2,000,000
	OTHER:						PRODUCTS - COMP/OP AGG	$ Below
								$
D	AUTOMOBILE LIABILITY	Y	Y	21UECHV0794	8/1/2024	8/1/2025	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	X ANY AUTO						BODILY INJURY (Per person)	$
	[ ] OWNED AUTOS ONLY [ ] SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
A	[ ] UMBRELLA LIAB [X] OCCUR	Y	Y	MKLV3EUL103353	8/1/2024	8/1/2025	EACH OCCURRENCE	$ 5,000,000
	X EXCESS LIAB [ ] CLAIMS-MADE						AGGREGATE	$ 5,000,000
	DED [X] RETENTION $ 10,000							$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N	N / A	Y	UB-3J747620-24-42-G	8/1/2024	8/1/2025	X PER STATUTE [ ] OTH-ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? [N] (Mandatory in NH)						E.L. EACH ACCIDENT	$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000
C	INLAND MARINE			BMO60331810	8/1/2024	8/1/2025	JOB LIMIT	$250,000
F	ERRORS & OMMISSIONS			ANE1939938.24	8/1/2024	8/1/2025	CLAIM/AGGREGATE	$2000000/$2000000
A	GL - Products Completed			MKLV3PBC003347	8/1/2024	8/1/2025	OCCURRENCE/AGGREGATE	$1000000/$2000000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Proj: Bid #31041421

CERTIFICATE HOLDER

City of Tampa
306 E. Jackson Street 3N
Tampa FL 33602
USA

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

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Bids

PURCHASING/MTH/CGP/LW

RESOLUTION NO. 2022- 18

A RESOLUTION APPROVING THE BIDS OF KEYSTONE RIDGE DESIGNS, INC., SWARTZ ASSOCIATES, INC., MOST DEPENDABLE FOUNTAINS INC., MILLER RECREATION EQUIPMENT AND DESIGN, INC. AND APOLLO SUNGUARD SYSTEMS, INC. FOR PRODUCTS ONLY; KOMPAN, INC., ADVANCED RECREATIONAL CONCEPTS, LLC, LAUBS DRAINAGE & FLEXI-PAVE, LLC, BLISS PRODUCTS AND SERVICES, INC., TOP LINE RECREATION, INC., LANIER PLANS INC. DBA KORKAT, PLAYMORE WEST, INC. AND REP SERVICES, INC. FOR PRODUCTS AND SERVICES FOR THE FURNISHING OF PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT IN THE ESTIMATED AMOUNT OF $4,500,000 FOR USE BY THE PARKS AND RECREATION DEPARTMENT; AUTHORIZING THE DIRECTOR OF PURCHASING TO PURCHASE SAID PROPERTY, SUPPLIES, MATERIALS OR SERVICES; PROVIDING AN EFFECTIVE DATE.

WHEREAS, the City of Tampa issued an Invitation to Bid No. 31041421 for Parks Site Furnishing, Playground Equipment and Surfacing, and Installation, Repairs and Replacement for use by the Parks and Recreation Department; and

WHEREAS, the City has decided to use multiple Awardees to help produce the lowest net cost.

NOW, THEREFORE,

BE IT RESOLVED BY THE CITY COUNCIL
OF THE CITY OF TAMPA, FLORIDA:

Section 1. That the bids of Keystone Ridge Designs, Inc., Swartz Associates, Inc., Most Dependable Fountains Inc., Miller Recreation Equipment and Design, Inc. and Apollo Sunguard Systems, Inc. for products only; Kompan, Inc., Advanced Recreational Concepts, LLC, Laubs Drainage & Flexi-Pave, LLC, Bliss Products and Services, Inc., Top Line Recreation, Inc., Lanier Plans Inc. dba Korkat, Playmore West, Inc. and Rep Services, Inc. for products and services, for the furnishing of:

Parks Site Furnishing, Playground Equipment and Surfacing, and Installation, Repairs and Replacement
Bid #31041421
Estimated Expenditure: $4,500,000,

such bids are hereby approved; and the Director of Purchasing is hereby authorized to purchase same.

Section 2. That the award period shall be for a three-year period from the effective date of the awarding or approving Resolution, and may be renewed on the same terms and conditions for one additional one-year period.

Section 3. The catalogs for various bidders are on file in the Office of the Purchasing Department of the City of Tampa, are hereby approved in their entirety or in substantially similar form.

Section 4. This will provide $1,500,000 in FY2022, $1,500,000 in FY2023, subject to annual appropriation and $1,500,000 in FY2024, subject to annual appropriation for the furnishing of Parks Site Furnishing, Playground Equipment and Surfacing, and Installation, Repairs and Replacement for use by the Parks and Recreation Department, controlled by requisition.

Section 5. That the proper officers of the City of Tampa are authorized to do all things necessary and proper in order to carry out and make effective the provisions of this Resolution, which shall take effect immediately upon its adoption.

PASSED AND ADOPTED BY THE CITY COUNCIL OF THE CITY OF TAMPA, FLORIDA, ON JAN 13 2022

CHAIR/CHAIR PRO-TEM
TAMPA CITY COUNCIL

ATTEST:

CITY CLERK/~~DEPUTY CITY CLERK~~

APPROVED AS TO FORM
e/s
BY MARCELLA T. HAMILTON
ASSISTANT CITY ATTORNEY

CITY OF TAMPA
PURCHASING DEPARTMENT

INVITATION TO BID

Pursuant to Chapter 69-1119, Special Acts, Laws of Florida, sealed Bids will be received by the Director of Purchasing, City of Tampa, in his office until:

1:00 PM ON 4/12/21
UNMANNED AIRCRAFT SYSTEMS FOR HERNANDO COUNTY FIRE & EMERGENCY SERVICE (RE-BID)

1:00 PM ON 4/13/21
VEHICLE TOWING SERVICES FOR THE FLEET MANAGEMENT DIVISION (FIRE RESCUE)

1:30 PM ON 4/13/21
VEHICLE TOWING SERVICES FOR THE FLEET MANAGEMENT DIVISION

2:30 PM ON 4/13/21
BITUMINOUS MATERIALS (PRIME AND TACK COATS)

1:30 PM ON 4/12/21
PLASMA TABLE (RE-BID)

2:00 PM ON 4/14/21
NITRILE PERSONAL PROTECTIVE GLOVES (EMS PROTECTIVE GLOVES)

3:00 PM ON 4/14/21
PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, AND INSTALLATION, REPAIRS AND REPLACEMENT

~~**3:00 PM ON 4/15/21**~~
DIAMOND BLADES

then and thereafter to be publicly opened and read. Bid documents are available at the Purchasing Department (Phone No. 813/274-8351).

It is hereby made a part of this Invitation to Bid that the submission of any Bid in response to this advertised request shall constitute a Bid made under the same conditions for the same contract price and for the same effective period as this Bid to all public entities in Hillsborough County.

Dated: 4/2/21
Gregory K. Spearman, CPPO
Director of Purchasing

City of Tampa, FL
306 E. Jackson Street
Tampa, FL 33602

4/2/21LG 1T

BID PROPOSAL TABULATION/CITY OF TAMPA Note: This is a preliminary summary. Information contained in this summary is subject to review. THIS IS NOT AN AWARD	OPENED: May 13, 2021 @ 3:30 PM	BID #/TITLE: 31040621, Parks and Playground Equipment, Surfacing, Installation and Repairs	READ BY: Celeste Gibbons-Peoples
			TABBED BY: Acquanetta Grant
		DATE ADVERTISED:	DEPT: Parks & Recreation

ITEM/ QUANTITY	DESCRIPTION / BIDDER>>>	Top Line Recreation		Most Dependable Fountains, Inc.		Laubs Drainage and Flexipade	
		UNIT	TOTAL	UNIT	TOTAL	UNIT	TOTAL
			Bid Received		Bid Received		Bid Received
TOTAL AMOUNT OF BID:							

ITEM/ QUANTITY	DESCRIPTION / BIDDER>>>	BSN Sports		Playmore West		KOMPAN, Inc.	
		UNIT	TOTAL	UNIT	TOTAL	UNIT	TOTAL
			Bid Received		Bid Received		Bid Received
TOTAL AMOUNT OF BID:							

ITEM/ QUANTITY	DESCRIPTION / BIDDER>>>	REP Services		KorKat, Inc.		Keystone Ridge Designs, Inc.	
		UNIT	TOTAL	UNIT	TOTAL	UNIT	TOTAL
			Bid Received		Bid Received		Bid Received
TOTAL AMOUNT OF BID:							

ITEM/ QUANTITY	DESCRIPTION / BIDDER>>>	Miller Recreation Equipment		Southern Recreation		Apollo Sunguard	
		UNIT	TOTAL	UNIT	TOTAL	UNIT	TOTAL
			Bid Received		Bid Received		Bid Received
TOTAL AMOUNT OF BID:							

ITEM/ QUANTITY	DESCRIPTION / BIDDER>>>	Swartz Associates		Bliss Products		Advanced Recreational Concepts, LLC.	
		UNIT	TOTAL	UNIT	TOTAL	UNIT	TOTAL
			Bid Received		Bid Received		Bid Received
TOTAL AMOUNT OF BID:							

City of Tampa
Jane Castor, Mayor

Purchasing Department
Gregory K. Spearman, CPPO, Director
306 E. Jackson Street, 2E
Tampa, Florida 33602

Office (813) 274-8351
Fax: (813) 274-8355

March 31, 2021

INVITATION TO BID

Pursuant to Chapter 69-1119, Special Acts, Laws of Florida, sealed Bids for the furnishing of: **BID NO. 31041421, PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, AND INSTALLATION, REPAIRS AND REPLACEMENT** will be received by the Director of Purchasing, City of Tampa, until **APRIL 14, 3:00 PM** then to be opened and read. The Bid Opening shall be thereafter and open to the Public VIA GoToMeeting. Below are the instructions to participate in this online meeting:

Please join my meeting from your computer, tablet or smartphone.
https://global.gotomeeting.com/join/225298773

You can also dial in using your phone.
United States: +1 (669) 224-3412

Access Code: 225-298-773

In accordance with the Americans with Disabilities Act ("ADA") and Section 286.26, Florida Statutes, persons with disabilities needing a reasonable accommodation to participate in this public hearing or meeting should contact the City of Tampa's ADA Coordinator at least 48 hours prior to the proceeding. The ADA Coordinator may be contacted by phone at 813-274-3964, email at TampaADA@tampagov.net, or by submitting an ADA - Accommodations Request online form available at http://www.tampagov.net/ADARequest. Please note that the City of Tampa may not be able to accommodate any request received less than 48 hours before the scheduled hearing or meeting.

Attached are important instructions and specifications regarding responses to this invitation. **Failure to follow these instructions may result in your bid being disqualified.**

Questions regarding this bid should be referred to **CELESTE GIBBONS-PEOPLES, CPPB, CERTIFIED PROCUREMENT ANALYST.** Questions shall be submitted by email to **celeste.gibbons-peoples@tampagov.net**. Questions pertaining to the Bid document will be accepted up to five days prior to the scheduled opening date and time referenced above.

Submission of bid responses by mail or express mail must be in a sealed envelope with the Bidder's name and return address indicated. **Type or print the Bid Number and Bid Title on the carrier envelope.** Address the bid envelope as follows:

Purchasing Department (This address is appropriate for mailing and express mail)
Tampa Municipal Office Building, 2nd Floor
306 E. Jackson Street
Tampa, Florida 33602

The Tampa Municipal Office Building is a controlled access building and all visitors are required to obtain a Visitor's Pass prior to visiting the Purchasing Department.

Bids shall be accepted no later than the time and date specified on the **INVITATION TO BID**. The Bid Opening shall be thereafter and open to the Public. All bids received after the due date and time shall be rejected. Offers by telegram, telephone or transmitted by facsimile (FAX) machine are not acceptable. No bid may be withdrawn or modified after the time fixed for the opening of bids.

Submittals may be sent electronically via the Internet as an attachment to an email addressed to BidControl@Tampagov.net . The subject line of the email should include the Bid/RFP number and title. **To ensure that an electronic submittal is received by the opening date and time listed above it is recommended that the Bidder/Proposer submit their**

documents no less than 30 minutes prior to the deadline. VERIFICATION OF THE CITY'S RECEIPT OF A BID SUBMITTED ELECTRONICALLY IS THE BIDDER/PROPOSER'S RESPONSIBILITY. To verify receipt of submittals sent electronically, Bidders/Proposers may contact the Purchasing Department at 813-274-8351. Any submittal received after the deadline will not be considered.

STATEMENT OF NO BID

WE WANT YOUR FEEDBACK BECAUSE IT MATTERS TO US

The Purchasing Department's mission is to provide the best specifications in our Bid and Request for Proposal packages to receive maximum participation from the industry/market. Please take a few minutes to briefly explain to us why you will not be responding to the City's Bid or Request for Proposal.

INSTRUCTIONS TO BIDDER

EXECUTED, SEALED BID: For hardcopy submittals, Bidder should submit the original and two copies of the bid response form, the Bidder's Affidavit form and any other requested forms or documents furnished by the City in the bid package. Documents must be executed by an original signature of an authorized representative of the Bidder.

City of Tampa bids are issued electronically via DemandStar's eProcurement bid distribution system. Obtaining bids through Demandstar will ensure that vendor will have the following capabilities: receipt of bids electronically, track the status of bid award activity, receive addenda, be certified as a minority vendor to meet the City of Tampa's minority certification requirements, receive the results of bid awards and view plans and blueprints online electronically. Vendors who obtain specifications and plans from sources other than Demandstar are cautioned that the bid packages may be incomplete. The City will not accept incomplete bids. Contact Demandstar at 800-711-1712 or visit www.demandstar.com/supplier for more information.

The City is not responsible for errors and omissions occurring in the transmission or downloading of any quote documents, plans, or specifications from this website. In the event of any discrepancy between information on this website and the hard copy quote documents, the terms and conditions of the hardcopy document will prevail. DemandStar has no affiliation with the City of Tampa other than as a service that facilitates communication between the City and its vendors. DemandStar is an independent entity and is not an agent or representative of the City. Communications to DemandStar does not constitute communications to the City. Contact DemandStar at 800-711-1712 or visit www.DemandStar.com/supplier for more information.

Bidders discovering any ambiguity, conflict, discrepancy, omission or other error in this BID, shall immediately notify the City of such error in writing and request modification or clarification of the BID. Modifications will be made by issuing an addendum and will be given by written notice to all prospective Bidders who received an original BID from DemandStar (Those who are on the Plan Holders List). Addenda will be posted and disseminated by DemandStar at least five days prior to this BID opening date. The Bidder is responsible for clarifying any ambiguity, conflict, discrepancy, omission or other error in the BID prior to submitting the bid or it shall be deemed waived.

Bid tabulations (results) will be posted to DemandStar and made available to bidders after the scheduled public opening of the sealed bids.

The bid documents contain a General Conditions Section and may, in most cases, contain a Technical Specification Section. General Conditions contain general requirements and Technical Specifications detail the scope of the goods and/or services requested. The Technical Specifications shall always govern whenever there appears to be a conflict.

The Bidder shall comply with the applicable requirements of Federal and state laws, all Codes and Ordinances of the City of Tampa as amended from time to time and any applicable professional regulations.

The Bidder is expected to carefully examine the entire bid package, including but not limited to the all provisions, terms, and conditions. **Failure to do so will be at the Bidder's risk.**

GPC LISTING

City of Plant City
Buddy Storey
Purchasing Manager
Drawer C
Plant City, FL 33563
813-659-4270 - Telephone
813-659-4216 - Fax
wstorey@plantcitygov.com

City of Temple Terrace
Judy Crutcher, Assistant Purchasing Agt.
P.O. Box 16930
Temple Terrace, FL 33687
813-506-6420 – Telephone
813-989-7185 – Fax
jcrutcher@templeterrace.com

Clerk of Circuit Court
601 E. Kennedy Blvd.-13th Floor
P.O. Box 1110
Tampa, FL 33601
Phone: (813) 276-8100 Ext.7721
FAX: (813) 272-5521
www.hillsclerk.com

Tampa-Hillsborough County Expressway Authority
1104 East Twiggs St. Suite #300
Tampa, Florida 33602
813-272-6740 – Telephone
813-276-2492 – Fax
Man.Le@tampa-xway.com

Hillsborough Area Regional Transit Authority
Melissa Smiley
4305 E. 21st Street
Tampa, FL 33605
813-623-5835 – Telephone
813-664-1119 – Fax
smileym@gohart.org

Hillsborough Co. Aviation Authority
P. O. Box 22287
Tampa International Airport
Tampa, FL 33622-2287
Phone: (813) 870-8730
FAX: (813) 875-6670
www.tampaairport.com

Hillsborough County School Board
P. O. Box 3408
Tampa, FL 33601-3408
Phone: (813) 272-4329
FAX: (813) 272-4007
www.sdhc.k12.fl.us

Hillsborough Community College
Vonda Melchior, Director of Purchasing
39 Columbia Drive
Tampa, FL 33606
813-253-7060 – Telephone
813-253-7561 – Fax
vmelchoir@hcc.fl.edu

Hillsborough County Board of County Commissioners
Scott Stromer, Director
601 E. Kennedy Blvd., 26th Floor
Tampa, FL 33601
Phone: (813) 272-5790
FAX: (813) 272-6290
procurementservices@hillsboroughcounty.org

Hillsborough Co. Sheriff's Office
Christina R. Porter, Chief Financial Officer
P.O. Box 3371
Tampa, FL 33601
813-247-8032 – Telephone
813-242-1825 – Fax
CRPorter@hcso.tampa.fl.us

State Attorney's Office
Mark Ober, State Attorney
800 E. Kennedy Blvd., 5th Floor
Tampa, FL 33602
813-272-5400 – Telephone
813-272-7014 – Fax
Ober_M@SAO13th.com

Tampa Port Authority
Donna Casey, Procurement Analyst
P.O. Box 2192
Tampa, FL 33601
813-905-5164 – Telephone
813-905-5109 – Fax
dwebb@tampaport.com

Supervisor of Elections
601 E. Kennedy Blvd., 16th Floor
Tampa, FL 33602
Phone: (813) 276-8274
FAX: (813) 272-7043
www.votehillsborough.org

City of Tampa Housing Auth.
Jerome Ryans, President/CEO
1514 Union Street
Tampa, FL 33607
813-253-0551 – Telephone
813-4522 – Fax
irenew@thafl.com

Tampa Sports Authority
Joe Haugabrook, Director of Purchasing
4201 N. Dale Mabry Highway
Tampa, FL 33607
813-673-4300 – Telephone
813-673-4312 – Fax
jhaugabrook@tampasportsauthority.com

Tax Collector
601 E. Kennedy Blvd., 14th Floor
Tampa, FL 33602
Phone: (813) 307-6222
FAX: (813) 307-6521
www.hillstax.org

The Children's Board of Hills. County
1002 E. Palm Avenue
Tampa, FL 33605
Phone: (813) 229-2884
FAX: (813) 228-8122
www.childrensboard.org

University of South Florida
George Cotter, Director
Purchasing Services
4202 E Fowler Ave SVC-1072
Tampa, FL 33620
813-971-3340 – Telephone
gcotter@admin.usf.edu

Property Appraiser
601 E. Kennedy Blvd., 16th Floor
Tampa, FL 33602
Phone: (813) 272-6100
FAX: (813) 272-5519
www.hcpafl.org

Tampa Palms Community Dev. Dist.
16311 Tampa Palms Blvd W
Tampa, FL 33647
Phone: (813) 977-3933
Fax: (813) 977-6571
www.tpoa.net

GENERAL CONDITIONS FOR
SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, INSTALLATION, REPAIRS AND REPLACEMENT

1. SCOPE AND CLASSIFICATION

1.1 SCOPE. This specification describes Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement for use by the City of Tampa Parks and Recreation Department.

1.2 CLASSIFICATION. The classification shall be as contained in the technical portion of this specification listed herein below.

2. QUALITY ASSURANCE PROVISIONS

2.1 TEST AND INSPECTION. It shall be the Awardee's responsibility to perform all tests and inspections required by this specification, unless otherwise stated in the award. The City of Tampa reserves the right to perform any of the tests and inspection requirements where said tests and inspections are needed to further determine compliance with this specification.

2.2 QUALITY AND QUALITY CONTROL. A system of test and inspection shall be used to ensure receipt of the quality and quantity of material(s)/service(s) purchased. Material(s)/service(s) will be promptly inspected and any discrepancies from the purchase order and/or the supplier's invoice shall be reported immediately to the Director of Purchasing.

3. AWARDEE LIABILITY

3.1 GUARANTEE. The material(s) supplied shall be guaranteed to be free from defect of composition, conception and workmanship for the minimum manufacturer's warranty period from the date of acceptance by the City. Any parts or portions found not in accordance with this specification will be rejected by the City and returned to the Awardee at the Awardee's expense for immediate replacement.

4. CONDITIONS

4.1 AUTHORIZATION. All orders shall be placed via City of Tampa Purchase Orders, or as releases against a City of Tampa "Open" Purchase Order. **OFFICIAL AWARD WILL BE MADE BY CITY OF TAMPA PURCHASE ORDER ONLY.** As relating to the Government Purchasing Council of Hillsborough County, any member may place orders as dictated by its individual entity's preference.

4.2 FURNISHING BID ITEMS. Award items are to be furnished on an "as needed, when needed basis" during the life of the award.

4.3 BACKORDERS. Any backordered materials shall be made available to the City within 15 working days of the time of backorder (original date of receipt). If the backorder cannot be filled within the time frame of this section, then the City of Tampa is to be notified, in writing, thus permitting the City to obtain the required materials and/or exercise its options.

4.4 QUALITY. The materials to be furnished shall be currently in production and shall be of the manufacturer's standard or better quality.

4.5 BRAND INDICATION. Where same is applicable, all Bidders shall clearly indicate manufacturer/trade name and identifying number in the space provided within the attached proposal of this specification and invitation for bid.

4.7 PENALTIES. The City of Tampa reserves the right to increase or decrease quantities shown without penalty.

4.8 ADDITION/DELETION. The City of Tampa reserves the right to add to or delete any item from this bid or resulting award when deemed to be in the best interest of the City of Tampa.

4.9 PACKAGING. Only materials that are packaged in the original factory fresh packaging shall be accepted. No materials that have been re-packaged or that are in adulterated or damaged packages shall be accepted at the receiving location, nor shall after-market materials be accepted at the receiving location. Any attempt by the Awardee to furnish the City of Tampa with other than first quality materials shall constitute default as outlined in this specification.

4.10 SUBSTITUTION. The Awardee shall not substitute items for like items without the approval of the City. Any violation of such procedures may result in a possible award cancellation. All approved substitutes shall be annotated as such on the Awardee's shipping document(s).

4.11 BID PRICES. Bid prices shall be firm and shall not be amended after the date and time of the bid opening. Any attempt by the Awardee to amend said bid prices shall constitute default as outlined in this specification.

Prices quoted in the Proposal and Bid Response form shall include all shipping costs, shipped F.O.B. Tampa, Florida or to the facility location specified by the requestor or the purchase order.

All taxes of any kind and character payable on account of the work done and materials furnished under the award shall be paid by the Awardee and shall be deemed to have been included in the bid. The Laws of the State of Florida provide that sales tax and use taxes are payable by the Awardee upon the tangible personal property incorporated in the work and such taxes shall be paid by the Awardee and shall be deemed to have been included in the bid. The City is exempt from all state and federal sales, use, transportation and excise taxes.

Award prices include all royalties and costs arising from patents, trademarks, and copyrights in any way involved in the work. Whenever the Awardee is required or desires to use any design, device, material or process covered by letters of patent or copyright, the Awardee shall indemnify, defend and save harmless the City, its officers, agents and employees from any and all claims for infringement by reason of the use of any such patented design, tool, material, equipment, or process, to be performed under the contract, and shall indemnify the said City, its officers, agents, and employees for any costs, expenses and damages which may be incurred by reason of any infringement at any time during the prosecution or after the completion of the work. The duty to defend under this paragraph is independent and separate from the duty to indemnify, and the duty to defend exists regardless of any ultimate liability of the Awardee, the City and any indemnified party. This provision shall survive the termination of this award and shall continue in full force and effect so long as the possibility of any liability, claim or loss exists, unless otherwise prohibited by law.

4.12 BID EVALUATION. The evaluation of bids and the determination as to the quality, durability and warranty of material(s)/service(s) offered shall be the responsibility of the City of Tampa and will be based on information furnished by the Bidder.

4.13 BASIS OF AWARD. As deemed in the best interest, the City of Tampa reserves the right to make award(s) by group of items, all or none, or a combination thereof with one or more supplier(s) or provider(s) The City may reject any and all bids or waive any irregularity or technicality in bids received.

The pricing structure shall be derived from the most current catalog(s) or price sheet(s) at the time of the bid opening minus a percentage discount from the Suggested List column of the published price. All percentage discounts quoted shall be firm and final during the award period.

Award Criteria/Responsibility. The award will be made to the lowest responsive, responsible Bidder. To determine the responsibility of the monetary Bidder, the City may request and review documentation relative to the ability of the Bidder to satisfactorily perform the work specified in a first class manner as well as documentation of its experience; the financial condition of the Bidder from a current financial report and the Bidder's credit rating; whether the Bidder has ever been declared in default of an award; the Bidder's insurability, eligibility for bonding; and any/all pertinent information deemed necessary to determine said responsibility.

Prior to award resulting from this solicitation, the proposed Awardee(s) shall be registered to transact business in the State of Florida and shall furnish the City with proof of registration with ten days of the notice to do so by the City. Failure to promptly submit this evidence of qualification to transact business in the State of Florida may be a basis for rejection of the bid.

Any Bidder who is owing to the City of Tampa upon any debt, contract, or other obligation to the City, or who is a defaulter as a surety or otherwise, will not be eligible for consideration for contract award regarding this solicitation.

An award will be made, if at all, within 120 days after opening of the bids.

4.14 COMMUNICATION POLICY. During any solicitation period, including any protest and/or appeal, no contact with City officials or employees, other than with the individuals specifically identified in the solicitation, the Director of Purchasing or the Legal Department is permitted from any proposer/bidder. Such communication shall result in an automatic disqualification for selection in the pending solicitation and any subsequent City solicitations for a period of six (6) months, no matter the outcome of the solicitation or any protest and/or appeal.

4.15 AWARD PERIOD AND RENEWAL. The award period shall be for a three-year period from the effective date of the award, and may, by mutual written agreement, be renewed at the same terms and conditions for an additional one-year period.

4.15.1 SUPPLEMENTAL UNILATERAL RENEWAL PERIODS. The City, through its Director of Purchasing, has the option and reserves the right to unilaterally extend the original contract term or any renewal term for up to three (3) additional thirty (30) day periods, at the same terms and conditions. Notice of the City's intent to renew shall be provided by the City in writing to the Awardee prior to the expiration of the contract, or the renewal period if the contract has been previously renewed.

4.16 NON-APPROPRIATION OF FUNDS. In the event no funds or insufficient funds are appropriated for expenditures under this award, the City will notify the Awardee in writing of such occurrence and the award shall terminate without penalty or expense to the City on the last day of the fiscal year in which sufficient funds have been appropriated.

4.17 PRICE ESCALATION/DE-ESCALATION. The City of Tampa will allow a price escalation provision within this award.

The original bid prices shall be firm and may be revised upon the receipt of updated catalog and price lists. The Awardee(s) shall provide to the City of Tampa with the published manufacturers price lists anytime the manufacturers revise their dated price pages. The City of Tampa will have 30 days upon receipt of the dated price pages to review and make necessary changes.

In no event shall the percentage of mark-up change from the percentage mark-up indicated on the Bid Response Pages.

4.18 PERFORMANCE. The Awardee may be required to furnish evidence in writing that he or she maintains a permanent place of business and has adequate equipment, finances, personnel, and inventory to furnish the items offered satisfactorily and expeditiously and can provide necessary services.

4.19 PROOF OF DISTRIBUTORSHIP. When requested, it shall be the responsibility of the Bidder(s) to furnish with their bid(s) a letter stating that said Bidder is a factory authorized distributor for the Greater Tampa area for the items for which said Bidder has submitted their bid.

4.20 INSPECTION. The City of Tampa reserves the right to inspect the Bidder's place of business and equipment prior to awarding any award to determine the responsibility of said Bidder to perform or provide the requirements of the bid request.

4.21 AWARD CHANGES. No changes, over the award period, shall be permitted unless prior written approval is given by the Director of Purchasing and, where applicable, confirmed by resolution of the City Council of the City of Tampa.

4.22 ASSIGNMENT. To the extent permitted by applicable law, this contract, and all rights or obligations hereunder, is not assignable, in whole or in part, by operation of law, acquisition of assets, merger, consolidation, dissolution or otherwise without the advance written approval of the other party to this contract. Any attempted assignment of this contract by a party without the advance written approval of the other party shall be invalid and unenforceable against the other party. Any approved assignment of this contract by the Awardee will not relieve the Contractor from the performance of its duties, covenants, agreements, obligations, and undertakings under this contract, unless the assignment expressly provides otherwise. No assignment by the Awardee shall be effective unless the assignee confirms in writing to the City that the assignee accepts and shall comply with all of the duties, responsibilities, and

obligations of the Awardee. Notwithstanding the foregoing, the City may assign its rights under this contract (without the Awardee's consent or approval) to a governmental successor of the City. An assignment by the City of its rights under this contract to a governmental successor of the City will relieve the City from the performance of its duties, covenants, agreements, and obligations under this contract after the effective date of the assignment. However, the City shall continue to be liable for the obligations it incurred under this contract prior to the effective date of the assignment. Action by the City in awarding a bid/proposal to a bidder/proposer, which has disclosed its intent to assign or subcontract in its response to the ITB/RFP, without exception shall constitute approval for purposes of this award.

4.23 DEFAULT/RE-AWARD. Any award resulting from this specification may be cancelled by the Director of Purchasing in whole or in part by written notice of default to the Awardee upon non-performance or violation of award terms, including the failure of the Awardee to deliver materials or services within the time stipulated in this specification, unless extended in writing by the Director of Purchasing. In the event an award is cancelled because of the default of the Awardee, the Director of Purchasing may: (i) purchase the materials or services specified in this specification on the open market; or (ii) make an award to the next lowest bidder and establish the period of such award, provided such period is no longer than the award period set forth in this specification.

4.24 CANCELLATION. When deemed to be in the best interest of the City of Tampa, any awards or contracts resulting from this specification may be cancelled by the following means:

4.24.1 10-day written notice with cause; or

4.24.2 30-day written notice without cause.

4.25 REJECTION. The City of Tampa reserves the right to cancel, reject any and/or all bids, or to waive any irregularities and accept that bid which is the lowest and best.

4.26 GOVERNMENT PURCHASING COUNCIL. Hillsborough County Government Purchasing Council ("GPC") members, may, at their discretion or option, utilize this bid as they require. Estimated quantities for Hillsborough County GPC members have not been included in the Bid Response form. Purchases by these entities may increase the value of the award. A list of the members of the GPC is contained within this bid document.

Any Hillsborough County GPC member which avails itself of this contract will establish its own contract, place its own orders, issue its own purchase orders and issue its own exemption certificates as required by the Bidder. It is understood and agreed that the City of Tampa is not a legally bound party to any contractual agreement made between any other governmental entity and the Bidder as a result of this Bid.

4.27 USE OF CONTRACT BY OTHER GOVERNMENTAL AGENCIES. Unless otherwise stipulated by the Bidder in its proposal, the Bidder agrees to make available to all government agencies, departments, and municipalities the proposed prices submitted in accordance with the terms and conditions of this Solicitation Document, should any governmental entity desire to buy under the Contract resulting from this Solicitation Document.

Any other governmental agency, department, or municipality which avails itself of this contract will establish its own contract, place its own orders, issue its own purchase orders and issue its own exemption certificates as required by the Bidder. It is understood and agreed that the City of Tampa is not a legally bound party to any contractual agreement made between any other governmental entity and the Bidder as a result of this Bid.

4.28 USE OF STATE CONTRACT, GPC, OR COOPERATIVE PURCHASING BIDS. The City of Tampa reserves the right to utilize applicable State of Florida Contracts, GPC Bids, or those contracts of any other federal, state, or local governmental entity under the terms of a bid submitted to such entity, provided that such contract is procured in compliance with the procuring entity's law, bylaws, regulations, or ordinances regarding competitive solicitation, which must provide for full and open competition for any items covered by this specification when the use of same is in the best interest of the City of Tampa.

4.29 CONVICTED VENDOR LIST (PUBLIC ENTITY CRIME). A person or affiliate who has been placed on the convicted vendor list following a conviction for a public entity crime may not submit a bid on an award/contract to provide any goods or services to a public entity, may not submit a bid on an award/ contract with a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to a public entity, may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a contract with any public entity, and may not transact business with any public entity in excess of the threshold amount provided in Section 287.017

for Category Two for a period of 36 months from the date of being placed on the convicted vendor list. [See Florida State Statute 287.133 (2)(a)]

4.30 FLORIDA PUBLIC RECORDS LAW. In accordance with Chapter 119 of the Florida Statutes, and, except as may be provided by Chapter 119 of the Florida Statutes and other applicable State and Federal Laws, all Bidders should be aware that the Bid and the responses thereto are in the public domain and are available for public inspection and copying. If the Bidder is asserting that certain information in its Bid is confidential and/or proprietary and/or exempt from public disclosure, then the Bidder is required to do the following: (1) identify, with specificity, the information which the Bidder asserts is confidential and/or proprietary and/or exempt from public disclosure, (2) place such information (including any applicable electronic media on which such information is contained) in a sealed envelope that is separate from the Bidder's other Bid documents, (3) clearly label the envelope that contains the confidential, proprietary and/or exempt information as follows: "EXEMPT FROM PUBLIC DISCLOSURE" with Bidder's name and the Bid number marked on the outside, and (4) specifically cite the applicable Florida Statute(s) that exempts such information from public disclosure - such citation must be placed on the sealed envelope and also on a separate document contained within the sealed envelope along with any relevant explanations. The envelope that contains the Bidder's confidential/proprietary/exempt information must be submitted with the Bidder's other Bid documents. Bidder is advised that failure to follow the aforementioned instructions may result in Bidder's alleged confidential/proprietary/exempt information being disclosed to the public. All submittals received in response to this Bid will become the property of the City of Tampa and will not be returned. In the event of an award, all documentation produced as part of the contract will become the exclusive property of the City.*

Be aware that the designation of an item as exempt from public disclosure by a Bidder may be challenged in court by any person or entity. By designation of material in your Bid submittal as exempt from public disclosure, Bidder agrees to defend the City of Tampa (and its employees, agents and elected and appointed officials) against all claims and actions (whether or not a lawsuit is commenced) related to Bidder's designation of material as exempt from public disclosure and to hold harmless the City of Tampa (and its employees, agents and elected and appointed officials) for any award to a plaintiff for damages, costs and attorneys' fees, and for costs and attorneys' fees incurred by the City by reason of any claim or action related to your designation of material as exempt from public disclosure.

***Note: The City will not accept Bid submittals when the entire submittal is labeled as exempt from public disclosure. Bidder's References and Cost or Price information will be deemed a public record, and if a claim of confidentiality/proprietary information is made, the City may deem the Bid submittal as "non-responsive".**

4.30.1 In accordance with section 119.071(1)(b)2, Florida Statutes, sealed bids, proposals, or replies received by the City of Tampa pursuant to a competitive solicitation are exempt from section 119.07(1), Florida Statutes and section 24(a), Art. I of the State Constitution until such time as the City of Tampa provides notice of an intended decision or until 30 days after opening the bids, proposals, or final replies, whichever is earlier.

4.30.2 In accordance with section 119.071(1)(b)3, Florida Statutes, if the City of Tampa rejects all bids, proposals, or replies submitted in response to a competitive solicitation and the City of Tampa concurrently provides notice of its intent to reissue the competitive solicitation, the rejected bids, proposals, or replies remain exempt from section 119.07(1), Florida Statutes and section 24(a), Art. I of the State Constitution until such time as the City of Tampa provides notice of an intended decision concerning the reissued competitive solicitation or until the City of Tampa withdraws the reissued competitive solicitation. A bid, proposal, or reply is not exempt for longer than 12 months after the initial City of Tampa notice rejecting all bids, proposals, or replies.

4.30.3 The City of Tampa is a public agency subject to Chapter 119, Florida Statutes. In accordance with Florida Statutes, 119.0701, Awardee agrees to comply with Florida's Public Records Law, including the following:

1. Awardee shall keep and maintain public records required by the City to perform the services;

2. Upon request from the City, Awardee shall provide the City with copies of the requested records, having redacted records in total or in part that are exempt from disclosure by law or allow the records to be inspected or copied within a reasonable time (with provision of a copy of such records to the City) on the same terms and conditions that the City would provide the records and at a cost that does not exceed that provided in Chapter 119, Florida Statutes, or as otherwise provided by law;

3. Ensure that public records, in part or in total that are exempt or that are confidential and exempt from public record requirements are not disclosed except as authorized by law for the

duration of the contract term and following completion (or early termination) of the contract if the Contractor does not transfer the records to the City;

4. Upon completion (or earlier termination) of the award, Awardee shall within 30 days after such event either transfer to the City, at no cost, all public records in possession of the Awardee or keep and maintain the public records in compliance with Chapter 119, Florida Statutes. If Awardee transfers all public records to the City upon completion (or earlier termination) of the award, Awardee shall destroy any duplicate records that are exempt or confidential and exempt from public records disclosure requirements. If Awardee keeps and maintains public records upon completion (or earlier termination) of the award, Awardee shall meet all applicable requirements for retaining public records. All records stored electronically must be provided to the City in a format that is compatible with the information technology systems of the agency.

5. The failure of Awardee to comply with Chapter 119, Florida Statutes, and/or the provisions set forth above shall be grounds for immediate unilateral termination of the contract by the City; the City shall also have the option to withhold compensation due Awardee until records are received as provided herein.

6. **IF THE AWARDEE HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES TO THE AWARDEE'S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS AWARD, CONTACT THE CUSTODIAN OF PUBLIC RECORDS AT 813/274-8351, COTPurchasingPRR@tampagov.net, AND MAILING ADDRESS OF PURCHASING DEPARTMENT, TAMPA MUNICIPAL OFFICE BUILDING, 2ND FLOOR, 306 E. JACKSON STREET, TAMPA, FL 33602.**

4.31 PROCUREMENT PROTEST PROCEDURES. A protest must be filed with the Director of the soliciting Department within five (5) business days of posting the City's intent to award and may be filed by an actual bidder or proposer, who is allegedly aggrieved in connection with the issuance of a bid solicitation, proposal solicitation or pending award of any contract in any competitive process utilized by the City of Tampa for procurements of supplies, materials or services and construction of public improvements and has standing to protest under Florida Law. Any protest must be filed in accordance with the City of Tampa Code, Chapter 2, Article V, Division 3, Purchases and Contracts, Section 2-282, Procurement Protest Procedures. Protests not complying with the provisions of this Section shall not be reviewed.

All dates and times specified in the Protest Procedures in Section 2-282 are calculated as city business days. A City business day shall mean 8:00 am to 5:00 pm Monday through Friday, with the exception of city holidays. In all instances any document required to be transmitted by a certain date must be received in the required office by 4:30 pm. An envelope which is postmarked by the required date is not sufficient. Transmittal by fax, email or other electronic means may be accepted. However, it shall be the responsibility of the party transmitting the document(s) to ensure that the document(s) were received, and the transmitting party shall bear any risk of interruption or failure in the electronic transmission.

4.32 LAWS, CODES AND ORDINANCES. The Awardee/Bidder shall comply with all Federal, State, County and City laws, rules and regulations as applicable to this bid.

4.33 AUDIT RIGHTS. Awardee agrees that the City or its authorized representative shall have access to, and the right to audit, examine, or reproduce, the financial books and records of Awardee related to Awardee's performance under the contract. Awardee shall retain all such records for a minimum period of six (6) years from the date of termination of the contract, including any renewal or extension hereof, or for such longer period of time as required by federal or state law, and shall be extended until the completion of any audit in progress. Awardee must keep all financial records in a manner consistent with generally accepted accounting principles. Awardee must provide access during normal business hours to the requested records no later than ten (10) calendar days after the written request by the City

or its authorized representative. If any audit reveals any material deviation from the contract requirements, any misrepresentations or any overcharges to the City, the City will be entitled to recover damages, as well as the cost of the audit. Any adjustments or payments which must be made as a result of any such audit or inspection of the Awardee's invoices or records must be made within a reasonable amount of time, but in no event may the time exceed ninety (90) calendar days, from presentation of the City's audit findings to the Awardee. Awardee shall include this right to audit section in any subcontractor agreements entered into in connection with this contract.

4.34 CITY OF TAMPA ETHICS CODE. The Bidder shall comply with all applicable governmental and city rules and regulations including the City's Ethics Code which is available on the City's website. (City of Tampa Code, Chapter 2, Article VIII. - Section 2-522)

Moreover, each Bidder responding to this Invitation to Bid or Request for Proposal acknowledges and understands that the City's Charter and Ethics Code prohibit any City employee from receiving any substantial benefit or profit out of any contract or obligation entered into with the City, or from having any direct or indirect financial interest in effecting any such contract or obligation. The Awardee shall ensure that no City employee receives any such benefit or interest as a result of the award of this Invitation to Bid or Request for Proposal. (City of Tampa Code, Chapter 2, Article VIII. - Section 2-514(d)).

Please note that the City's Ethics Code may be accessed on the Internet by utilizing the website link http://www.tampagov.net/human-resources/info/lobbyist-information or can be found in the City of Tampa's municipal codes published online by the Municipal Code Corporation at the website link https://www.municode.com/library/fl/tampa/codes/code_of_ordinances. Printed copies of the Ethics Code can also be obtained from the City Clerk's Office for a fee of $0.15 cents a page.

4.35 SCRUTINIZED COMPANIES. Section 287.135, Florida Statutes prohibits agencies from contracting with companies for goods or services of any amount that are (1) on the Scrutinized Companies that Boycott Israel List, created pursuant to Section 215.4725, Florida Statutes or are engaged in a boycott of Israel, and (2) with companies for goods or services of $1 million or more, that are on either the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, created pursuant to section 215.473, Florida Statutes or are engaged in business operations in Cuba or Syria.

A company that is on the Scrutinized Companies that Boycott Israel List or is engaged in a boycott of Israel may not bid on, submit a proposal for, or enter into a contract or renew a contract with an agency or local government entity for goods or services of any amount.

A company that is on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List or is engaged in business operations in Cuba or Syria may not bid on, submit a proposal for, or enter into a contract or renew a contract with an agency or local government entity for goods or services of $1 million or more.

Notwithstanding the aforementioned, the City may on a case-by-case basis permit a company on the Scrutinized Companies with Activities in Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, the Scrutinized Companies that Boycott Israel List, or are engaged in business operations in Cuba or Syria to be eligible for, bid on, submit a proposal for, or enter into or renew a contract for goods or services if the conditions set forth in Section 287.135(4) of the Florida Statutes are met.

If the City determines the Bidder submitted a false certification under Section 287.135(5) of the Florida Statutes upon submission of a bid or proposal, entering into a contract, on contract renewal, or if the Awardee has been placed on the Scrutinized Companies with Activities in the Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List or is on the Scrutinized Companies that Boycott Israel List or is engaged in a boycott of Israel or is engaged in business operations in Cuba or Syria, the City shall either terminate the contract after it has given the Awardee notice and an opportunity to demonstrate the City's determination of false certification was in error pursuant to Section 287.135(5)(a) of the Florida Statutes.

4.36 CONTRACT LITIGATION/LEGAL PROCEEDINGS. The Bidder shall identify any conditions (i.e. bankruptcy, pending and/or existing litigation, planned office closures, impending merger/acquisition) that may impede the Proposer's ability to perform the services set forth in this Bid. Bidder shall provide in detail information on the nature and magnitude of any litigation or proceeding whereby, currently or during the past five (5) years, a court or any administrative agency has ruled against the company in any matter related to the professional activities of the company.

This shall include any class actions wherein your company was named, industry investigations by Attorneys General, in addition to individual cases.

Bidder shall identify any pending lawsuits, past litigation relevant to subject matter of this Bid or litigation involving any unauthorized release of client confidential information, providing a statement of any litigation or pending lawsuits that have been filed against the Bidder's company currently or within the last five (5) years. If an action has been filed, state and describe the litigation or lawsuit filed, and identify the court or agency before which the action was instituted, the applicable case or file number, and the status or disposition for such reported action. If no litigation or lawsuit has been filed against the company, provide a statement to that effect.

Bidder shall provide information concerning any current or past bankruptcy proceedings currently or within the last five (5) years for any voluntary or involuntary declarations of bankruptcy concerning the company, partner or subsidiary, subcontractors, or any corporate officer with details of such proceedings.

Bidder must also provide information as to whether the Proposer or an affiliate of Bidder is currently or has in the last five (5) years ever pledged any interest in all or any portion of any current or future payment as collateral, including for example as part of an accounts receivable factoring program. If yes, please provide information identifying the type of arrangement, date of the arrangement, and name of the party to whom the interest was pledged.

4.37 MINIMUM WAGE AMENDMENT. The Awardee/Contractor shall comply with the minimum wage requirements as required in Article X, Section 24, Constitution of the State of Florida as of May 2, 2005.

The rate of wages for all persons employed by the Awardee/Contractor on the work covered shall not be less than the rate of wages required by the Fair Labor Standards Act (Public Law 104-188) enacted August 20, 1996.

4.38 DATA COLLECTION. Pursuant to Section 119.071(5)(a), Florida Statutes, social security numbers collected from bidders are used for identification, verification, and tax reporting purposes.

4.39 INVOICING. The Awardee shall furnish the City complete itemized invoices for the services performed. Invoices are to reflect the prices stipulated on the purchase order and as outlined in this bid/proposal document on the bid response/pricing sheets. The City will not accept an aggregate invoice. As part of the award process, the City may request a sample invoice. Invoices shall contain, but not be limited to the following information:

- Invoice number;
- Company Name;
- Purchase order number;
- Location and dates of service;
- COT Service Report;
- Cost of services as stated on Bid Response and extended price to reflect total cost for number of services performed.

At the time of submission of its invoices, the Awardee shall submit to the CITY a report on From MBD-30, "DMI-Payments" of all sub-contract contract amounts and payments along with any other completed reports or forms as may be required by the CITY. In the event the Awardee uses any WMBE and/or SLBE sub-contractors, the Awardee shall provide form MBD-40 "Letter of Intent" (LOI) for all WMBE and/or SLBE sub-contractors the Awardee intends to utilize.

- Form MBD-30 DMI Sub-(Contractors/Consultant/Suppliers) Payments
- Form MBD-40 Letter of Intent (LOI)

4.40 SUB-CONTRACTING SUBMITTALS. No Awardee shall assign the award/contract or any rights or obligations thereunder without the written consent of the City. **The Awardee shall be required to perform with its own forces at least fifty-one (51) percent of the work, unless written consent to subcontract a greater percentage of the work first obtained by the City.** In the event of such approved subcontracting, the Awardee agrees to provide the City with written documentation relative to the Subcontractor(s) solicited, or that will be employed in this award, including but not limited to submittal of attached the following Schedule of Sub-Contracting Forms:

- Schedule of All Sub-Contractors/Consultants/Suppliers Solicited - MBD 10
- Schedule of Sub-Contractors/Consultants/Suppliers to be Utilized - MBD 20

These forms must be completed (including signatures) and submitted with all bids or proposals. Submittals that do not contain these completed forms shall be deemed "non-responsive". Instructions on completing the forms are included after each form in this bid package.

Subcontractor shall be defined as; a business enterprise, firm, partnership, corporation, consultant or combination thereof having a direct contract with a prime contractor for any portion of the advertised work that is awarded by the owner/owner's representative.

Supplier shall be defined as; a business enterprise that either directly contracts with a Prime Contractor/Consultant or directly contracts with a Subcontractor under such Prime Contractor/Consultant to provide materials, supplies or equipment in connection with a Contract awarded by the owner/owner representative. A Supplier may be a regular dealer, distributor or manufacturer.

4.41 CONFLICT OF INTEREST. The City requires that the Bidder provide professional, objective, and impartial advice and at all times hold the City's interest(s) paramount, strictly avoid conflicts with other assignments or their own corporate interests and act without any consideration for future work. The Bidders have an obligation to disclose any situation of actual or potential conflict that impacts their capacity to serve the best interest of the City, or that may reasonably be perceived as having this effect. If the City, in its sole discretion, determines that a conflict of interest exists, such Bidder shall not be considered for award. Failure to disclose said situations may lead to the disqualification of the Bidder or the termination of its award.

Any such interests on the part of the Bidder or their employees, must be disclosed in writing to the City on ATTACHMENT A - CONFLICT OF INTEREST DISCLOSURE FORM that is included with this solicitation document. Also, the Bidder is aware of the conflict of interest laws of the State of Florida and the City of Tampa and agrees that they shall fully comply in all respects with the terms of said laws.

4.42 GOVERNING LAW/VENUE. The laws of the State of Florida (without giving effect to its conflicts of law principles) govern all matters arising out of or relating to this solicitation, including, without limitation, its interpretation, construction, performance, and enforcement. The parties hereto submit to the exclusive jurisdiction and venue of the state and federal courts located in Hillsborough County, Florida.

4.43 PAYMENT. Full payment will be made by the City after receipt and acceptance of materials/services and proper invoice in accordance with Florida Statutes § 218.70, et. seq., the Local Prompt Payment Act. Bidders that accept Visa/MasterCard payments can be enrolled in the City's ePayments program for faster payment turnaround, by contacting the City's Accounts Payable Department at acctspayable@tampagov.net.

4.44 EMPLOYEE VERIFICATION. In accordance with Section 448.095, Florida Statutes, the Awardee/Contractor agrees to register with and utilize the U.S. Department of Homeland Security's E-Verify system to verify the employment eligibility of all new employees hired during the term of the award/contract for the services specified in the award/contract. The Awardee/Contractor must also include a requirement in subcontracts that the subcontractor must register with and utilize the E-Verify system to verify the employment eligibility of all new employees hired by the subcontractor during the award/contract term. If the Awardee/Contractor enters into a contract with a subcontractor, the subcontractor must provide the Awardee/Contractor with an affidavit stating that the subcontractor does not employ, contract with, or subcontract with an unauthorized alien. The Awardee/Contractor shall maintain a copy of such affidavit for the duration of the award/contract. If the City has a good faith belief that the Awardee/Contractor has knowingly violated Section 448.09(1), Florida Statutes, the City shall terminate the Contract with the Awardee/Contractor, and the Contractor may not be awarded a contract with the City for at least 1 year after the date on which the award/contract was terminated. The Awardee/Contractor is liable for any additional costs incurred by the City as a result of the termination of the award/contract. If the City has a good faith belief that a subcontractor knowingly violated the law, but the Awardee/Contractor has otherwise complied with the law, the City shall promptly notify the Awardee/Contractor and order the Awardee/Contractor to immediately terminate the award/contract with the subcontractor.

4.45 FORCE MAJEURE. If a Force Majeure Event occurs, the party that is prevented by that Force Majeure Event from performing any one or more obligations under this award/contract (the "Nonperforming Party") will be excused from performing those obligations, on condition that it complies with its obligations herein. "Force Majeure Event" means, with respect to the Nonperforming Party, any event or circumstance, regardless of whether it was foreseeable, which was not caused by the Nonperforming Party, which prevents the Nonperforming Party from complying with any of its obligations under this award/contract, on condition that the Nonperforming Party uses reasonable efforts

to comply with its obligations, except that a Force Majeure Event will not include any strike or other labor unrest that affects only one party, economic hardship of a party, an increase in prices, changes in market conditions, or a change of law. Upon the occurrence of the Force Majeure Event, the Nonperforming Party shall notify the other party in writing within ten (10) days of the occurrence of that the Force Majeure Event, its effect on performance, and how long that party expects the Force Majeure Event to last. Thereafter the Nonperforming Party shall update the other party as reasonably necessary. During a Force Majeure Event, the Nonperforming Party shall use reasonable efforts to limit damages to the other party and to resume its performance under this award/contract. The other party has the right to terminate the award/contract if the Non-Performing Party's Force Majeure Event continues for more than a reasonable time.

5. INDEMNIFICATION. The Contractor/Successful Proposer/Awardee/Firm (collectively the "Firm") releases and agrees to defend, indemnify and hold harmless the City of Tampa, its officers, elected and appointed officials, and employees from and against any and all liabilities, claims, suits, damages, charges, or expenses (including attorney's fees, whether at trial or appeal) which the City may suffer, sustain, incur, or in any way be subjected to by reason or as a result of any act, negligence, or omission on the part of the Firm, its agents or employees, in the execution or performance of the obligations assumed under or incidental to, the Award/Contract/Agreement (collectively the "Agreement") into which the Firm and the City will enter, except when caused solely by the fault, failure, or negligence of the City, its agents, or employees. Where the Agreement is for a construction contract for the City, this Section shall be limited to the provisions of Section 725.06, Florida Statutes, with the greater of $1 Million Dollars or a sum equal to the total contract price set as the monetary limitation on the extent of the indemnification.

6. NON-DISCRIMINATION IN CONTRACTING AND EMPLOYMENT

The following provisions are hereby incorporated into any contract executed by or on behalf of the City of Tampa. The Awardee shall comply with the following Statement of Assurance:

During the performance of this Award, the Awardee herein assures the City, that said Awardee is in compliance with Title VII of the 1964 Civil Rights Act, as amended, the Florida Civil Rights Act of 1992, and the City of Tampa Code of Ordinances, Chapter 12, in that the Awardee does not on the grounds of race, color, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, familial status, or marital status, discriminate in any form or manner against said Awardee's employees or applicants for employment.

Awardee understands and agrees that this award is conditioned upon the veracity of this Statement of Assurance, and that violation of this condition shall be considered a material breach of this award. Furthermore, the Awardee herein assures the City that said Awardee will comply with Title VI of the Civil Rights Act of 1964 when federal grant(s) is/are involved. This Statement of Assurance shall be interpreted to include Vietnam-Era Veterans and Disabled Veterans within its protective range of applicability.

Awardee further acknowledges and agrees to provide the City with all information and documentation that may be requested by the City from time to time regarding the solicitation, selection, treatment and payment of subcontractors, suppliers and vendors in connection with this award. Awardee further acknowledges that it must comply with City of Tampa Code of Ordinances, Chapter 26.5.

Per City of Tampa Code of Ordinances, Section 2-284, Bidder(s) shall perform criminal history screenings similar in nature to the practices contained in Chapter 12, Article VI, City of Tampa Code of Ordinances. The City of Tampa's municipal codes are published online by the Municipal Code Corporation at the website link https://www.municode.com/library/fl/tampa/codes/code_of_ordinances.

6.1 EQUAL OPPORTUNITY

The City of Tampa hereby notifies all Bidders that all eligible businesses, including Small Local Business Enterprises (SLBEs) and Women/Minority Business Enterprises (WMBEs) will be afforded a full opportunity to participate in any Award made by the City of Tampa pursuant to this present proposal matter and will not be subjected to discrimination on the basis of race, color, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, familial status, or marital status. The City of Tampa prohibits any person involved in City of Tampa contracting and procurement activities, to discriminate on the basis of race, color, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, familial status, or marital status.

For additional information please visit the Equal Business Opportunity Office at: http://www.tampagov.net/ebo

7. INSURANCE. This award is subject to the attached and incorporated CITY OF TAMPA INSURANCE REQUIREMENTS included as Exhibit 1 of this bid document which should be reviewed for complete insurance details and coverage requirements.

TECHNICAL SPECIFICATIONS FOR
PARKS SITE FURNISHINGS, PLAYGROUND EQUIPMENT AND SURFACING, AND INSTALLATION, REPAIRS AND REPLACEMENT

8. PRODUCTS OR SERVICES TO BE PROVIDED

Bids are being requested and will be evaluated on the basis of a minimum fixed percentage discount from Bidder's most current catalog(s) for site furnishings, playground equipment and surfacing, installation, repairs and replacement in order to produce the lowest net cost for the City of Tampa Parks and Recreation Department.

8.1 Bidders shall provide a firm, fixed discount that will be applied to all items in the Bidder's current catalog(s), CD(s), or printed price sheet(s). If discount varies by manufacturer, indicate that on the bid response page/Attachment B – Products List.

9. INSTALLATION, REPAIRS AND REPLACEMENT SERVICES

9.1 Play equipment must meet or exceed Consumer Products Safety Commission (CPSC) Guidelines and American Standard and Testing Material (ASTM) Standards or equivalent. IPEMA Certification is desired but not required. Installation of shelters, shade structures, gazebos, trellises, etc. shall conform to the appropriate ASTM and industry standards.

9.2 Installation, repair and replacement services must be according to relative industry standards such as ASTM, National Playground Safety Institute or equivalent.

9.3 Fall zone material and installation must adhere to industry related standards to include CPSC and ASTM.

9.4 Any and all damages to grounds, site furnishings, lighting, underground utilities, buildings, paving, landscape trees, shrubs, turf and groundcover, City owned, or leased equipment shall be corrected by the Awardee(s) at no additional cost to the City.

9.5 Awardee(s) must coordinate all utility locations to be marked on site prior to any excavation.

9.6 All work must be inspected prior to approval. Payments are based on successful inspection.

9.7 Permits may be paid and/or reimbursed by the City of Tampa upon prior approval from Department Representative.

9.8 Bidders providing a service must hold an Occupational or Business License. In accordance with Florida Statutes 205.065, a current Department of Professional Regulation certificate may be provided in lieu of an Occupational License, please submit a copy of certificate(s) or license(s) with Bid submittal.

9.9 All equipment/products and/or installation, repair or replacement must be approved by Department Representative upon completion.

9.10 Catalogs and price sheets for all site furnishings, playground equipment, site-related products, and any surfacing or paving related products that you would like to be considered as part of this Bid must be submitted with the Bid.

9.11 All freight charges must be included in the individual project quote.

9.12 Awardee responsible for securing work zone and all materials or equipment left on site, and the price shall be included on the individual project quote.

9.13 The Awardee/Sub-contractor shall be responsible for unpacking, uncrating and installation at job site in accordance with specifications and removal of all trash and debris.

9.14 Installation, repair and replacement contractors must provide written certification that they are certified/authorized to install playground equipment as required by the manufacturer along with the quote/ proposal. Each Foreperson on site supervising installation must have NPSI (National Playground Safety Institute)

certification or at least one member of the crew on site must have NPSI certification, proof of certifications may be requested by Department Representative prior to installation. The installing contractor must provide a certificate or signed letter stating, "This equipment has been installed according to manufacturer's specifications and meets the standards of any applicable certifying organization". Letter or certificate must be provided at time of final inspection.

10. ENGINEERED WOOD FIBER MULCH (Must meet or exceed "Fibar")

10.1 The mulch shall meet the United States Consumer Product Safety Commission ASTM F2075 requirements for engineered wood fiber for use as a Playground Safety Surface Under and Around Playground Equipment, ASTM F1292 requirements for Impact Attenuation of Surfacing materials Around Playground Equipment and be Chromated Coper Arsenate (CCA) Free. The mulch must also be free of foreign matter to be considered acceptable. If the material is not per specifications, the Awardee has within 24 hours to remove the mulch at no additional cost to the City.

10.2 Must submit manufacturer's specification product data sheet and a quart size plastic bag sample of the engineered wood fiber mulch to be evaluated by the City of Tampa project manager.

10.3 Please indicate on the Bid Response Page a price for Engineered Wood Fiber Mulch per cubic foot and square foot.

11. SURFACING PRODUCTS (POUR-IN-PLACE)
Must meet or exceed "Surface America Poured-In-Place 3-Part"

11.1.1 Must meet or exceed the following criteria:
Bonded rubber Poured-In-Place:

11.1.2 Polyurethane.
11.1.3 Blend of 100% recycled SBR (styrene butadiene rubber) and urethane.

11.2 Shock Attenuation (ASTM F1 292):

11.2.1 Gmax: Less than 200.
11.2.2 Head Injury Criteria: Less than 1000.

11.3 Flammability (ASTM D2859)
11.4 Tensile Strength (ASTM D4 I 2): 60 psi (4113 kPa).
11.5 Tear Resistance (ASTM D6240: 140%
11.6 Water Permeability: 0.4 gal/yd2/second.
11.7 Accessibility: Comply with requirements of ASTM F195 I.
11.8 Required mix proportion by weight:

11.8.1 Base mat: 16+% urethane (as ratio: 14% urethane divided by 86% rubber). 14 % urethane, 86% rubber (based on entire rubber & urethane mis).

11.8.2 Top Surface: 22% urethane (ration: 18% urethane divided by 82% rubber). 18 % urethane, 82% rubber (based on entire rubber & urethane mix).

11.9 Must meet current ASTM specification for determination of accessibility to surface systems under and around playground equipment.

11.10 Attach to the Bid Response Page for surfacing product and must be included in your bid response stating:

11.10.1 List pricing based on thickness and color options.
11.10.2 This price sheet may not contain other terms and/or conditions.
11.10.3 Your company name must clearly be indicated on the attached price sheet.
11.10.4 Prices must be stated per square foot and must include all materials, binder adhesives, non woven geotextile membrane, delivered, supplied and installed.

11.11 Must submit manufacturer's specification product data sheet and a 4" X 6" sample to be evaluated by the Department Representative to evaluate.

12. CATALOG(S), CD(S) OR PRINTED PRICE SHEET(S) WITH BID

All Bidders must submit two (2) CD(s), catalog(s) or printed price sheet(s) to be used with their bid submittal.

13. CATALOG(S), CD(S) OR PRINTED PRICE SHEET(S) UPDATED ANNUALLY

Each year as new catalog(s), CD(s) or printed price sheet(s) are published the Awardees shall furnish new catalog(s), CD(s) or printed price sheet(s) to the Department Representative.

14. UPDATING OF CATALOG(S), CD(S) OR PRINTED PRICE SHEET(S)

Bid pricing will be held to the current catalog(s), CD(s) or printed price sheet(s) in use by the City of Tampa Parks and Recreation Department. Price increases will not be allowed until a new catalog has been approved by the Department Representative and price sheets are emailed to celeste.gibbons-peoples@tampagov.net or mailed to City of Tampa Purchasing Department, 306 East Jackson Street, 2E, Tampa, FL 33602. Once approved, it will be the Awardee's responsibility to distribute an ample supply of catalog(s), CD(s) or printed price sheet(s) to the Parks and Recreation Department. Booklets and prices used to adjust catalog(s), CD(s) or printed price sheet(s) pricing will not be acceptable. This process shall be followed during any and all catalog changes

15. BID PRICING & CATALOG DISTRIBUTION

Bid and individual project quote pricing will be held to the current catalog approved pricing in use by the City of Tampa.

16. NEW ITEMS

New items appearing in the Awardee's catalog released after the bid opening date are to be covered by the same terms and conditions as indicated in the bid.

17. DELIVERY TERMS

17.1 DELIVERY POINT FOR EQUIPMENT

Delivery is FOB Destination. If there are any delivery charges, the price must be notated on the project proposal and invoice as a separate line item. The delivery address(es) will be listed on the purchase order. No common carrier/drayage charges will be honored by the City of Tampa.

17.2 DELIVERY TIME

Orders shall be placed as needed and expected delivery time frame shall be included when quotes are given to the City. Delivery time frame from receipt of purchase order may determine which vendor receives the order.

17.3 HOURS OF DELIVERY

Deliveries shall be made between the hours of 8:00 a.m. and 3:00 p.m. except on Saturdays, Sundays, or holidays when all Facilities may be closed to receive deliveries.

17.4 F.O.B. POINT

Inspection and acceptance will be F.O.B. Destination unless otherwise provided. Title to/or risk of loss or damage to all items shall be the responsibility of the Awardees until acceptance by the City. If the materials or services supplied to the City are found to be defective or not to conform to specifications, the City reserves the right to cancel the order and product will be returned and shall be at the Awardee(s) expense.

18. LABELING

Each carton, package, box and/or container shall be labeled. Each label shall identify each carton as follows:

18.1 Name of item and Model number, if applicable
18.2 Quantity of item contained
18.3 Purchase Order Number
18.4 Company

19. DAMAGED ITEMS

In the event an item is received, and it is later determined there is concealed damage when the item is unpacked, the item must be replaced by the Awardee at no cost to the City.

20. INSTALLATION

20.1 The Awardee(s) shall provide all barricades and take all necessary precautions to protect building site, supplies, equipment, tools and personnel. All work shall be complete in every respect and accomplished in a workmanlike manner and the Awardee shall provide for removal of all debris from the City premises.

20.1.1 Where installation is required, the Awardee shall deliver, unload, set in place, install, make ready to run, and test (test to be accomplished in the presence of an authorized representative of the City). The Awardee shall provide a qualified person, at no extra cost, to assure performance of the item and to make the initial start-up and achieve the successful testing. Upon completion of the successful testing of the item, the authorized representative of the City shall inspect and accept. All miscellaneous installation materials shall be included in the Total Turnkey price. The miscellaneous installation materials include the following: conduit, wire, fiber, connectors, fittings, boxes, concrete footings, etc. All materials used in the installation shall be of good quality and shall be free of defects that would diminish the appearance of the product or render it structurally or operationally unsound.

20.1.2 Installation includes the furnishing of any equipment, rigging, hardware, and materials required to install, repair or replace the product in the proper location. Awardee shall protect the site from damage and shall repair damages or injury caused during the installation by the Awardee or its employees or agents. If any alteration is required to the site or building to achieve installation, the Awardee shall promptly restore the structure or site to its original condition. Awardee shall perform installation work so as to cause the least inconvenience and interference with the City's operations, and with proper consideration of others on site. Upon completion of the installation, the location and surrounding area of work shall be left clean and in a neat and unobstructed condition, with everything in satisfactory repair and order.

21. GUARANTEED QUANTITIES

No guarantee is given or implied as to the total quantity or dollar value of this Bid. The City is not obligated to place any order with any Awardee participating in this Bid. The City, however, will be urged to refer to catalogs and discounts of Awardee(s) in their attempt to fill their requirements at the lowest net prices.

22. METHOD OF ORDERING

Items shall be ordered via individual purchase orders on an "as needed" basis for the term of the Award. Invoices must be submitted against each individual purchase order.

23. ORDERS

The City will issue purchase orders directly to the Awardee(s) for the purchase of Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement. The Awardee(s) will be expected to honor these orders according to the discount terms and conditions listed in this bid. Each purchase order will be faxed or mailed to the Awardee(s). The order should be reviewed for correct prices, catalog numbers, extensions, etc

24. NO DAMAGES FOR DELAY

Awardee is not entitled to any additional compensation or increase in the contract sum for direct, indirect, impact, storage, or any other damages arising because of any hindrance or delays caused by the owner or any other cause whatsoever. Awardee's only remedy for delay, not caused or exacerbated by the Awardee(s), shall be an extension of time to complete the Awardee's scope of work. Any extension of time for an order, shall be granted at the sole discretion of the Department Representative.

25. SUBSTITUTES

Unapproved substitutes shall not be allowed. If items are not available, the Department noted on the purchase order must be contacted prior to shipment in order to determine if a substitute is acceptable.

EXHIBIT 1 - CITY OF TAMPA INSURANCE REQUIREMENTS

Prior to commencing any work or services or taking occupancy under that certain written agreement or award (for purposes of this document, Agreement) between the City of Tampa, Florida (City) and Firm/Awardee/Successful Proposer/Contractor/Consultant/Lessee/non-City party, etc. (for purposes of this document, Firm) to which this document is attached and incorporated as an Exhibit or otherwise, and continuing during the term of said Agreement (or longer if the Agreement and/or this document so requires), Firm shall provide, pay for, and maintain insurance against claims which may arise from or in connection with the performance of the Agreement (including without limitation occupancy and/or use of certain property/premises) by Firm, its agents, representatives, employees, suppliers, subtenants, or subcontractors (which term includes sub-consultants, as applicable) of any tier subject to the terms and conditions of this document. Should at any time Firm not maintain the insurance coverages required, City at its sole option (but without any obligation or waiver of its rights) may terminate the Agreement. All provisions intended to survive or to be performed subsequent to the expiration or termination of the Agreement shall survive, including without limitation Firm's obligation to maintain or renew coverage, provide evidence of coverage and certified copies of policies, etc. upon City's request and/or in response to a potential claim, litigation, etc.

The following coverages are required: ("M" indicates million(s), for example $1M is $1,000,000)

A. **Commercial General Liability (CGL) Insurance** on the most current Insurance Services Office (ISO) Form CG 00 01 or its equivalent on an "occurrence" basis (Modified Occurrence or Claims Made forms are not acceptable without prior written consent of the City). Coverage must be provided to cover liability contemplated by the Agreement including without limitation premises and operations, independent contractors, contractual liability, products and completed operations, property damage, bodily, personal and advertising injury, contractual liability, explosion, collapse, underground coverages, personal injury liability, death, employees-as-insureds. Products and completed operations liability coverage maintained for at least 3 years after completion of work. **Limits shall not be less than $1M per occurrence and $2M general aggregate for Agreements valued at $2M or less; if valued over $2M, a general aggregate limit that equals or exceeds the Agreement's value.** If a general aggregate limit applies, it shall apply separately to the project/location (ISO CG 25 03 or 25 04 or equivalent).

B. **Automobile Liability (AL) Insurance** in accordance with Florida law, as to the ownership, maintenance, and use of all owned, non-owned, leased, or hired vehicles. **AL insurance shall not be less than: (a) $500,000 combined single limit each occurrence bodily injury and property damage for Agreements valued at $100,000 or less or (b) $1M combined single limit each occurrence bodily injury and property damage for Agreements valued over $100,000.** If transportation of hazardous material involved, the MCS-90 endorsement (or equivalent).

C. **Worker's Compensation (WC) & Employer's Liability Insurance** for all employees engaged under the Agreement, Worker's Compensation as required by Florida law. **Employer's Liability with minimum limits of (a) $500,000 bodily injury by accident and each accident, bodily injury by disease policy limit, and bodily injury by disease each employee for Agreements valued at $100,000 and under or (b) $1M bodily injury by accident and each accident, bodily injury by disease policy limit, and bodily injury by disease each for all other Agreements.**

D. **Excess (Umbrella) Liability Insurance** for Agreements valued at $2M or more, at least $4M per occurrence in excess of underlying limits and no more restrictive than underlying coverage for all work performed by Firm. May also compensate for a deficiency in CGL, AL, or WC.

Firm affirmatively states that the insurance requirements as set forth above are of adequate types and amounts of insurance coverage for any type of claim/loss for the proposed work or services.

ACCEPTABILITY OF INSURERS - Insurance is to be placed with insurers admitted in the State of Florida and who have a current A.M. Best rating of no less than **A-:VII** or, if not rated by A.M. Best, as otherwise approved by the City in advance and in writing.

ADDITIONAL INSURED - City, its elected officials, departments, officers, officials, and employees shall be covered as additional insureds on all liability coverage (e.g. CGL, AL, and Excess (Umbrella) Liability) as to liability arising out of work or operations performed by or on behalf of Firm including materials, parts, or equipment furnished in connection with such work or operations and automobiles owned, leased, hired, or borrowed by or on behalf of Firm. Coverage can be provided in the

form of an endorsement to Firm's insurance (at least as broad as ISO Form CG 20 10 11 85 or **both** CG 10 20, CG 20 26, CG 20 33, or CG 20 38 **and** CG 20 37 if later revisions used).

CANCELLATION/NON-RENEWAL – Each insurance policy shall provide that at least 30 days written notice must be given to City of any cancellation, intent to non-renew, or material reduction in coverage (except aggregate liability limits) and at least 10 days' notice for non-payment of premium. Firm shall also have an independent duty to notify City in like manner, within 5 business days of Firm's receipt from its insurer of any notices of same. If any policy's aggregate limit is reduced, Firm shall directly take steps to have it reinstated. Notice and proof of renewal/continued coverage/certifications, etc. shall be sent to the City's notice (or Award contact) address as stated in the Agreement with a copy to the following: ☒ Purchasing Department, 306 E Jackson Street, Tampa, FL 33602
☒ Other: City of Tampa Insurance Compliance c/o Ebix BPO, PO Box 100085- ZS, Duluth, GA 30096

CERTIFICATE OF INSURANCE (COI) AND ENDORSEMENTS – to be provided to City by insurance carrier prior to Firm beginning any work/services or taking occupancy and, if the insurance expires prior to completion of the work or services or Agreement term (as may be extended), a renewal COI at least 30 days before expiration to the above address(es). COIs shall specifically identify the Agreement and its subject (project, lease, etc.), shall be sufficiently comprehensive to insure City (named as additional insured) and Firm and to certify that coverage extends to subcontractors' acts or omissions, and as to permit the City to determine the required coverages are in place without the responsibility of examining individual policies. **Certificate Holder must be The City of Tampa, Florida.**

CLAIMS MADE – If any liability insurance is issued on a claims made form, Firm agrees to maintain such coverage uninterrupted for at least 3 years following completion and acceptance of the work either through purchase of an extended reporting provision or purchase of successive renewals. The Retroactive Date must be shown and be a date not later than the earlier of the Agreement date or the date performance/occupancy began thereunder.

DEDUCTIBLES/ SELF-INSURED RETENTIONS (SIR) – must be disclosed to City and, if over $500,000, approved by the City in advance and in writing, including at City's option being guaranteed, reduced, or eliminated (additionally if a SIR provides a financial guarantee guaranteeing payment of losses and related investigations, claim administration, and defense expenses). Firm shall be fully responsible for any deductible or SIR (without limiting the foregoing a policy with a SIR shall provide or be endorsed to provide that the SIR may be satisfied by either the City or named insured). In the event of loss which would have been covered but for a deductible or SIR, City may withhold from any payment due Firm, under any agreement with the City, an amount equal to same to cover such loss should full recovery not be obtained under the policy.

PERFORMANCE – All insurance policies shall be fully performable in Hillsborough County, Florida (the County), and construed in accordance with Florida law. Further, all insurance policies must expressly state that the insurance company will accept service of process in the County and that the exclusive venue for any action concerning any matter under those policies shall be in the appropriate state court of the County.

PRIMARY POLICIES - Firm's insurance coverage shall be primary insurance coverage at least as broad as ISO CG 20 01 04 13 as to the City, its elected officials, departments, officers, and employees.. Any insurance or self-insurance maintained by the City, its elected officials, departments, officers, and employees shall be excess of the Firm's insurance and shall not contribute with it.

UNAVAILABILITY – To the fullest extent permitted by law, if Firm is out of business or otherwise unavailable at the time a claim is presented to City, Firm hereby assigns to the City all of its right, title and interest (but not any liabilities or obligations) under any applicable policies of insurance.

WAIVER OF SUBROGATION – With regard to any policy of insurance that would pay third party losses, Firm hereby grants City a waiver of any right to subrogation which any insurer of Firm may acquire against the City by virtue of the payment of any loss under such insurance. Firm agrees to obtain any endorsement that may be necessary to affect such waiver, but this provision shall apply to such policies regardless.

REVISED 3/13/2020

City of Tampa
Agenda Item Request
Department: Purchasing

Council Regular

Submittal Date: 3/10/2025
Requested Meeting Date: 4/03/2025
Type of Request: Council Resolution
Contact Theresa Samuel 8132748636
Subject A Resolution approving the renewal of awards with various vendors, for the furnishing of Parks Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement in the amount of $1,500,000 for use by Parks and Recreation
Resolution / Ordinance Title A Resolution approving the renewal of awards between the City of Tampa and Swartz Associates, Inc., Most Dependable Fountains, Inc., Miller Recreation Equipment and Design, Inc. and Apollo Sunguard Systems, Inc. for Products Only, without price escalations, and Kompan, Inc., Advanced Recreational Concepts, LLC, Laub's Drainage & Flexi Pave, LLC, Bliss Products and Services, Inc., Topline Recreation Inc., Lanier Plans Inc. dba Korkat, REP Services, Inc. and Playmore West, Inc. for Products and Services, without price escalations, with the exception of Playmore West, Inc. with a Manufacturer's Price Escalation, for the furnishing of Parks Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement in the estimated amount of $1,500,000 for use by the Parks and Recreation Department; authorizing the Director of Purchasing to purchase said property, supplies, materials or services; providing an effective date.

BACKGROUND:

It is recommended that the City renew its existing award with Swartz Associates, Inc., Most Dependable Fountains, Inc., Miller Recreation Equipment and Design, Inc., and Apollo Sunguard Systems, Inc., for Products Only; Kompan, Inc., Advanced Recreational Concepts, LLC, Laub's Drainage & Flexi Pave, LLC, Bliss Products and Services, Inc., Topline Recreation Inc., Lanier Plans Inc. dba Korkat, Playmore West, Inc. and REP Services, Inc. for Products and Services for the furnishing of Park Sites Furnishings, Playground Equipment and Surfacing, Installation, Repair and Replacement for use by the Parks and Recreation Department for an additional one-year term. The existing award was made January 2022. This award is in its original award, which was extended to April 12, 2025, per the bid document Section 4.15.1 Supplemental Unilateral Renewal Periods.

Swartz Associates, Inc., Most Dependable Fountains, Inc., Miller Recreation Equipment and Design, Inc., and Apollo Sunguard Systems, Inc., for Products Only; Kompan, Inc., Advanced Recreational Concepts, LLC, Laub's Drainage & Flexi Pave, LLC, Bliss Products and Services, Inc., Topline Recreation Inc., Lanier Plans Inc. dba Korkat, Playmore West, Inc. and REP Services, Inc. for Products and Services provides satisfactory service, quality of product and performance. The Parks & Recreation Department has reviewed the prices and feels that it is in the best interest of the City to renew the award for an additional one-year period. Swartz Associates, Inc., Most Dependable Fountains, Inc., Miller Recreation Equipment and Design, Inc., and Apollo Sunguard Systems, Inc., for Products Only; Kompan, Inc., Advanced Recreational Concepts, LLC, Laub's Drainage & Flexi Pave, LLC, Bliss Products and Services, Inc., Topline Recreation Inc., Lanier Plans Inc. dba Korkat, Playmore West, Inc. and

REP Services, Inc. for Products and Services have agreed to renew Park Sites Furnishings, Playground Equipment and Surfacing, Installation, Repair and Replacement without a price escalation and Playmore West, Inc. with the published manufacturers price lists which is allowed per the bid.

WMBE/SLBE participation goals were not prescribed in the solicitation because the scope did not meet required EBO parameters; however, it did not preclude participation.)

FISCAL IMPACT: Yes

FISCAL IMPACT STATEMENT:
This Resolution renews the awards between the City and Swartz Associates, Inc., Most Dependable Fountains, Inc., Miller Recreation Equipment and Design, Inc., Apollo Sunguard Systems, Inc. for products only, and Kompan, Inc., Advanced Recreational Concepts, LLC, Laub's Drainage & Flexi Pave, LLC, Bliss Products and Services, Inc., Topline Recreation Inc., Lanier Plans Inc. dba Korkat, Playmore West, Inc. and REP Services, Inc. for products and services, for the furnishing of Parks Site Furnishings, Playground Equipment and Surfacing, Installation, Repairs and Replacement in the estimated amount of $1,500,000, over a 12-month term, for use by the Parks and Recreation Department, controlled by requisition.

PROJECTED COSTS: Controlled by Requisition $750,000 FY2025 (Estimated Expenditure) Controlled by Requisition $750,000 FY2026 (Estimated Expenditure), subject to annual appropriation

Approver	Timestamp	Role
Theresa Samuel	3/11/2025 8:28:50 AM	Submitter
Deanna Faggart	3/19/2025 11:59:12 AM	Department Head
TONY MULKEY	3/19/2025 2:58:35 PM	Parks and Recreation
Sajan Patel	3/19/2025 3:48:40 PM	Equal Business Opportunity
Astonah Turner	3/20/2025 8:44:02 AM	Attorney Coordinator
Marcella Hamilton	3/20/2025 10:02:53 AM	Assistant City Attorney
Cate Wells	3/20/2025 11:02:42 AM	City Attorney
Marlene Rigal	3/20/2025 12:06:56 PM	Neighborhood and Community Affairs Deputy
Ocea Wynn	3/24/2025 10:20:36 AM	Neighborhood and Community Affairs
Andy Waitman	3/24/2025 10:28:01 AM	Finance Coordinator
Adam Hanes	3/24/2025 4:05:32 PM	Finance Fiscal and Lead Analyst
Ty Hawthorne	3/25/2025 8:17:28 AM	Budget Operating Manager
Michael Perry	3/25/2025 1:29:55 PM	Budget Officer
Dennis Rogero	3/26/2025 1:50:16 PM	Chief Financial Officer
JOHN BENNETT	3/26/2025 9:56:47 PM	Chief of Staff
JOHN BENNETT	3/27/2025 7:50:35 AM	Mayor