

January 31, 2024

Trevor Douthat Town Clerk Town of Dundee, FL 202 East Main Street Dundee, FL 33838

RE: RFP #24-04 Renovations to Dundee Community Center

SEMCO Construction, Inc. is pleased to submit our qualifications and experience for the above RFP to the Town of Dundee.

We have reviewed the scope of services and firmly believe that **SEMCO Construction, Inc. is the most qualified firm** to provide services for this project. As you review our proposal, you will find that our past experience with government contracts, our history of successful projects, and our ability to meet accelerated project schedules will prove our Project Team to be the best value for this contract.

SEMCO has been a family-owned company and a State Certified General Contractor since our incorporation in 1975. Through diversification involving key areas of Commercial, Public, Industrial (phosphate, citrus, and co-generation plants), Historic Restoration, Design/Build, and Construction Management, coupled with established long-term management, the company has remained competitive in all economic situations.

Our main office is located at 205 Century Blvd. in Bartow, Florida and will be responsible for all work.

In our 50 year history, SEMCO Construction, Inc. has completed over 7,500 projects. We maintain approximately 30 full-time employees and have over 25 employees that have been with the company over 20 years. Our solid construction experience has given us opportunities to develop great relationships with over 300 subcontractors and 450 suppliers who provide quality work and material, encompassing all phases of construction.

We understand the scope of work for this project and are committed to performing the work in a timely fashion. We have a clear understanding of the Town's requirements in the RFP and are fully prepared to perform the necessary scopes for the successful completion of this project.

We look forward to the opportunity to work with The Town of Dundee on the Community Center Renovations project. Thank you for your consideration.

Sincerely,

Jennifer Hall

Executive Vice President



BID FORM

FY 2023-2024 RFP 24-04 RENOVATIONS TO DUNDEE COMMUNITY CENTER

RETURN DATE:

January 31, 2024 by 4 PM

RETURN TO:

Office of the Town Clerk

Attn: RFP 24-04 Town of Dundee P.O. Box 1000 202 East Main Street Dundee, Florida 33838

Dun	dee, Florida 33838			
ITEM	QTY	UNIT	UNIT COST (\$)	TOTAL COST (\$)
1. Main Level	1	LF/EA./SF	Lump Sum	\$2,345.97
2. Main Dance Hall	1	LF/EA./SF	Lump Sum	\$26,761.14
3. Kitchen	1	LF/EA./SF	Lump Sum	\$8,623.33
4. Rear Hall	1	LF/EA./SF	Lump Sum	\$1,037.52
5. Foyer/Entry	1	LF/EA./SF	Lump Sum	\$5,016.31
6. Women's Restroom	1	LF/EA./SF	Lump Sum	\$25,321,03
7 Entry Hall	1	LF/EA./SF	Lump Sum	\$832.17
8. Men's Restroom	1	LF/EA./SF	Lump Sum	\$28,755.48
Per attached take-off				
17 mag			TOTAL (\$)	\$98,692.95

Bid Alternate

ITEM	QTY	UNIT	UNIT COST (\$)	TOTAL COST (\$)
1 All wall tile in bathroom	600	SF	\$12.00/SF	\$7,200.00
2.				

ALL BID FORMS SHOULD INCLUDE THE FOLLOWING INFORMATION:

Company Submitting Bid: <u>SEMCO Construction, Inc.</u>	
Company Address: 205 Century Blvd.	
Company City: Bartow	State: _FL Zip: _33830
Company Phone Number: 863-533-7193	Fax Number: <u>863-533-3376</u>
Authorized Representative: Jennifer Hall	
Signature:	Date: JANUARY 31, 2024
Print Name: Jennifer Hall	Phone Number:863-533-7193
Title: Executive Vice President	

NOTE: THE FAILURE TO FOLLOW THE BID PROTEST PROCEDURE REQUIREMENTS WITHIN THE TIME FRAMES PRESCRIBED HEREIN AS ESTABLISHED BY THE TOWN OF DUNDEE, FLORIDA, SHALL CONSTITUTE A WAIVER OF BIDDERS PROTEST AND ANY RESULTING CLAIMS.

SEMCO Construction, Inc.

205 Century Blvd Bartow, FL 33830 (863) 533-7193

Client:

Dundee Community Center

Property:

603 Lake Marie Blvd

Dundee, FL 33838

Operator:

SEMCOXAC

Estimator:

Steve Anderson

Position:

Estimator

Company:

Semco Construction

Business:

205 Century Blvd

Bartow, FL 33830

Reference:

SEMCO Construction, Inc.

Company: Business:

205 Century Blvd

Bartow,Fla 33830

Type of Estimate:

Other

Date Entered:

1/9/2024

Date Assigned: 1/4/2024

(863) 533-7193

Business: (863) 533-7193

sanderson@semco.cc

Business:

E-mail:

Price List:

FLWH8X_DEC23

Labor Efficiency:

Restoration/Service/Remodel

Estimate:

DUNDEE_COMUNITY_C

File Number:

24074



205 Century Blvd Bartow, FL 33830 (863) 533-7193

DUNDEE_COMUNITY_C

Main Level

DESCRIPTION		QTY
18. PERMITS AND FEES		1.00 EA
19. Commercial Supervision / Project Management - per hour		25.00 HR
Main Dance Hall		Height: 8'
DESCRIPTION		QTY
Remove FLOOR COVERING - VINYL		3,135.89 EA
2. R&R Cove base molding - rubber or vinyl, 4" high		241.00 LF
4. Vinyl plank flooring		3,135.89 SF
33. Drywall - Labor Minimum		1.00 EA
Kitchen		Height: 8'
DESCRIPTION		QTY
14. R&R Tile floor covering		424.13 SF
16. Content Manipulation charge - per hour		8.00 HR
34. Drywall - Labor Minimum		1.00 EA
93. R&R Tile base		89.83 LF
94. Floor leveling cement - Average		424.13 SF
rear Hall		Height: 8'
DESCRIPTION		QTY
5. Remove FLOOR COVERING - VINYL		97.50 EA
6. R&R Cove base molding - rubber or vinyl, 4" high		43.00 LF
7. Vinyl plank flooring		97.50 SF
Foyer/Entry		Height: 8
DESCRIPTION		QTY
 Remove FLOOR COVERING - VINYL R&R Cove base molding - rubber or vinyl, 4" high 		559.63 EA 95.83 LF
UNDEE_COMUNITY_C	1/17/2024	Page



205 Century Blvd Bartow, FL 33830 (863) 533-7193

CONTINUED - Foyer/Entry

DESCRIPTION	QTY
10. Vinyl plank flooring	559.63 SF
92. Drywall - Labor Minimum	1.00 EA

Women	Height: 8'
DESCRIPTION	QTY
20. Remove Ceramic tile - Standard grade	693.00 SF
22. R&R 5/8" drywall - hung, taped, floated, ready for paint	376.00 SF
24. Vinyl plank flooring	133.00 SF
25. Cove base molding - rubber or vinyl, 4" high	47.00 LF
26. Paint the walls - two coats	376.00 SF
35. R&R Handicap grab bar - Stainless steel, 1 1/2" x 30"	3.00 EA
37. R&R Bathroom mirror - w/metal frame - surface mtd - Commercial	3.00 SF
38. R&R Paper towel dispenser	2.00 EA
39. R&R Soap/hand sanitizer dispenser - wall mounted	2.00 EA
40. R&R Toilet partition (plastic laminate or baked enamel steel)	3.00 EA
41. R&R Toilet paper dispenser - double roll	3.00 EA
42. R&R Waste receptacle - semi-recessed	1.00 EA
43. R&R Sink - single	2.00 EA
45. R&R Sink faucet	2.00 EA
46. R&R P-trap assembly - ABS (plastic)	2.00 EA
47. R&R Angle stop valve	4.00 EA
48. R&R Toilet	3.00 EA
49. Add-on for pressure Flush Valve	3.00 EA
50. Countertop - flat laid laminate - laminate only	5.00 LF
52. R&R Backsplash - plastic laminate	7.00 SF
53. Floor leveling cement - Average	133.00 SF
54. R&R Outlet or switch	2.00 EA
56. R&R Bathroom ventilation fan, light,	1.00 EA
57. Fluorescent light fixture -LED	2.00 EA
58. R&R Interior door, 8' - solid alder - paneled - slab only	1.00 EA
60. R&R Door closer - Commercial grade	1.00 EA
62. R&R Door knob - interior	1.00 EA
63. R&R Door kick plate - 16 gauge, 8" x 34"	1.00 EA
64. Paint door slab only - 2 coats (per side)	2.00 EA

Entry Hall		Height: 8'	
DESCRIPTION		QTY	
11. Remove FLOOR COVERING - VINYL		69.67 EA	
DUNDEE_COMUNITY_C	1/17/2024	Page: 3	





CONTINUED - Entry Hall

DESCRIPTION	QTY
12. R&R Cove base molding - rubber or vinyl, 4" high	45.33 LF
13. Vinyl plank flooring	69.67 SF

Men	Height: 8'	
DESCRIPTION	QTY	
28. Remove Ceramic tile - Standard grade	693.00 SF	
29. R&R 5/8" drywall - hung, taped, floated, ready for paint	376.00 SF	
30. Vinyl plank flooring	133.00 SF	
31. Cove base molding - rubber or vinyl, 4" high	47.00 LF	
32. Paint the walls - two coats	376.00 SF	
65. R&R Handicap grab bar - Stainless steel, 1 1/2" x 30"	3.00 EA	
66. R&R Bathroom mirror - w/metal frame - surface mtd - Commercial	3.00 SF	
68. R&R Soap/hand sanitizer dispenser - wall mounted	2.00 EA	
69. R&R Toilet partition (plastic laminate or baked enamel steel)	3.00 EA	
91. R&R Urinal partition (plastic laminate or baked enamel steel)	1.00 EA	
70. R&R Toilet paper dispenser - double roll	3.00 EA	
71. R&R Waste receptacle - semi-recessed	1.00 EA	
72. R&R Sink - single	2.00 EA	
73. R&R Sink faucet	2.00 EA	
74. R&R P-trap assembly - ABS (plastic)	2.00 EA	
75. R&R Angle stop valve	4.00 EA	
76. R&R Toilet	2.00 EA	
89. R&R Urinal - wall hung	1.00 EA	
90. Plumber - per hour	16.00 HR	
77. Add-on for pressure Flush Valve	3.00 EA	
78. Countertop - flat laid laminate - laminate only	5.00 LF	
79. R&R Backsplash - plastic laminate	7.00 SF	
80. Floor leveling cement - Average	133.00 SF	
81. R&R Outlet or switch	2.00 EA	
82. R&R Bathroom ventilation fan, light,	1.00 EA	
83. Fluorescent light fixture -LED	2.00 EA	
84. R&R Interior door, 8' - solid alder - paneled - slab only	1.00 EA	
85. R&R Door closer - Commercial grade	1.00 EA	
86. R&R Door knob - interior	1.00 EA	
87. R&R Door kick plate - 16 gauge, 8" x 34"	1.00 EA	
88. Paint door slab only - 2 coats (per side)	2.00 EA	
67. R&R Paper towel dispenser	2.00 EA	



SEMCO Construction, Inc.

205 Century Blvd Bartow, FL 33830 (863) 533-7193

Grand Total

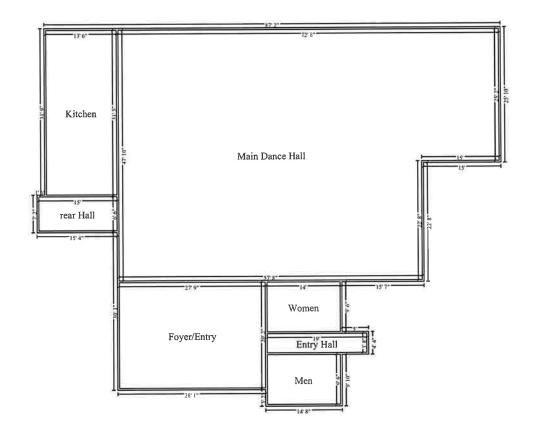
\$98,692.95

Steve Anderson Estimator

Grand Total Areas:

4,552.81		505.87	SF Ceiling SY Flooring SF Short Wall	609.00	SF Walls and Ceiling LF Floor Perimeter LF Ceil. Perimeter
•	Floor Area Exterior Wall Area	,	Total Area Exterior Perimeter of Walls	4,872.00	Interior Wall Area
0,00	Surface Area Total Ridge Length		Number of Squares Total Hip Length	0.00	Total Perimeter Length

Main Level





Main Level

1/17/2024

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DUNDEE_COMUNITY_C

Town of Dundee, FL

RED	#24	-∩4

Renovations to Dundee Community Center

Contractor References

Owner	Contact Name	Telephone #	Email Address
City of Wauchula	Jessica Newman	863-773-3535	inewman@cityofwauchula

Owner	Contact Name	Telephone #	Email Address
Polk County Board of County Commissioners	Steve McMillen	863-534-5527	stevemcmillan@polk-county.net

Owner	Contact Name	Telephone #	Email Address
City of Bartow	James Hargrove	863-534-0165	jhargrove@cityofbartow.net

Owner	Contact Name	Telephone #	Email Address
City of Lake Wales, FL	James Slaton	863-678-4182 x230	islaton@lakewalesfl.gov

Owner	Contact Name	Telephone #	Email Address
City of Haines City, FL	James Keene	863-421-9954 x5954	ikeene@hainescity.com





CONTRACTOR:

(Name, legal status and address) SEMCO Construction, Inc.

205 Century Blvd. Bartow, FL 33830

OWNER:

(Name, legal status and address)
Town of Dundee

202 E. Main Street Dundee, FL, 33838

BOND AMOUNT: 5%

Bid Bond

SURETY:

(Name, legal status and principal place of business)
Liberty Mutual Insurance Company
175 Berkley Street
Boston, MA 02116

MAILING ADDRESS FOR NOTICES:

Liberty Mutual Surety Claims P.O. Box 34526 Seattle, WA 98124 This document has important legal consequences.
Consultation with an attorney is encouraged with respect to its completion or modification.

Any singular reference to Contractor, Surety, Owner or other party shall be considered plural where applicable.

Five Percent of Bid Amount

PROJECT:

(Name, location or address, and Project number, if any) Renovations to Dundee Community Center RFP #24-04

The Contractor and Surety are bound to the Owner in the amount set forth above, for the payment of which the Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, as provided herein. The conditions of this Bond are such that if the Owner accepts the bid of the Contractor within the time specified in the bid documents, or within such time period as may be agreed to by the Owner and Contractor, and the Contractor either (1) enters into a contract with the Owner in accordance with the terms of such bid, and gives such bond or bonds as may be specified in the bidding or Contract Documents, with a surety admitted in the jurisdiction of the Project and otherwise acceptable to the Owner, for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof; or (2) pays to the Owner the difference, not to exceed the amount of this Bond, between the amount specified in said bid and such larger amount for which the Owner may in good faith contract with another party to perform the work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect. The Surety hereby waives any notice of an agreement between the Owner and Contractor to extend the time in which the Owner may accept the bid. Waiver of notice by the Surety shall not apply to any extension exceeding sixty (60) days in the aggregate beyond the time for acceptance of bids specified in the bid documents, and the Owner and Contractor shall obtain the Surety's consent for an extension beyond sixty (60) days.

If this Bond is issued in connection with a subcontractor's bid to a Contractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

When this Bond has been furnished to comply with a statutory or other legal requirement in the location of the Project, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to confirm the other legal requirement shall be deemed incorporated herein. When so furnished, the intent is that this Bond shall be constructed by bond and not as a common law bond.

Statutory bond and not as a common law bond.	
Signed and sealed this 24 day of January	, <u>2024</u>
1 1RI	SEAL
Was elled	SEMCO Construction, Inc. 1975
(Witness)	(Contractor as Pringapal) (Seals
	a College Manager Florida
	(Title) PRESIDENT
D 1/ 1m/	Liberty Mutual Insurance Company
I mind	(Surety)
(Witness) Daniel F. Wagner, Secretary	ZIN
	(Title) Taylor Wagner, Attorney-in-Fact
	(Title) Taylor Wagner, Amorney in Tues



This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

Liberty Mutual Insurance Company
The Ohio Casualty Insurance Company
West American Insurance Company

Certificate No:	8201369	
O O I DI I O O I I O I		

POWER OF ATTORNEY

KNOWN ALL PERSONS BY THESE PRESENTS: That The Ohio Casualty Insurance Company is a corporation duly organized under the laws of the State of New Hampshire, that Liberty Mutual Insurance Company is a corporation duly organized under the laws of the State of Massachusetts, and West American Insurance Company is a corporation duly organized under the laws of the State of Indiana (herein collectively called the "Companies"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint,
Daniel F. Wagner, Taylor Wagner
all of the city of Lakeland state of FL each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Companies in their own proper persons. IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Companies and the corporate seals of the Companies have been affixed
thereto this 5th day of June , 2019
Liberty Mutual Insurance Company The Ohio Casualty Insurance Company West American Insurance Company West American Insurance Company West American Insurance Company West American Insurance Company By: David M. Carey, Assistant Secretary
State of PENNSYLVANIA County of MONTGOMERY
On this 5th day of June , 2019 before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of Liberty Mutual Insurance Company, The Ohio Casually Company, and West American Insurance Company, and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer.
therein contained by signing on behalf of the corporations by himself as a duly authorized officer. IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at King of Prussia, Pennsylvania, on the day and year first above written. COMMONWEALTH OF PENNSYLVANIA
COMMONWEALTH OF PENNSYLVANIA Notarial Seal Teresa Pastella, Notary Public Upper Merion Twp., Montgomery County My Commission Expires March 28, 2021 Member, Pennsylvania Association of Notaries By: Teresa Pastella, Notary Public
This Power of Attorney is made and executed pursuant to and by authority of the following By-laws and Authorizations of The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company which resolutions are now in full force and effect reading as follows:
Notarial Seal Teresa Pastella, Notary Public Upper Merion Twp., Montgomery County My Commission Expires March 28, 2021 Member, Pennsylvania Association of Notarias This Power of Attorney is made and executed pursuant to and by authority of the following By-laws and Authorizations of The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company which resolutions are now in full force and effect reading as follows: ARTICLE IV – OFFICERS: Section 12. Power of Attorney. Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and execution of any such instruments and to attach thereto the seal of the Corporation. When so executed, such instruments shall be as binding as if signed by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority. ARTICLE XIII – Execution of Contracts: Section 5. Surety Bonds and Undertakings.
Any officer of the Company authorized for that purpose in writing by the chairman or the president, and subject to such limitations as the chairman or the president may prescribe, in shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Company by their signature and execution of any such instruments and to attach thereto the seal of the Company. When so executed such instruments shall be as binding as if signed by the president and attested by the secretary.
Certificate of Designation – The President of the Company, acting pursuant to the Bylaws of the Company, authorizes David M. Carey, Assistant Secretary to appoint such attorneys-infact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.
Authorization – By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature of any assistant secretary of the Company, wherever appearing upon a certified copy of any power of attorney issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed.
I, Renee C. Llewellyn, the undersigned, Assistant Secretary, The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company do hereby certify that the original power of attorney of which the foregoing is a full, true and correct copy of the Power of Attorney executed by said Companies, is in full force and effect and has not been revoked.
IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Companies this 24 day of January , 2024
1912 Series (1919) 1919

NONCOLLUSION AFFIDAVIT OF BIDDER

State of Florida
County of Polk
I Jennifer Hall ("Affiant"), being first duly sworn, deposes and says that:
(1) Affiant is <u>Executive VP</u> (insert job title) of <u>SEMCO Construction</u> , <u>Inc.</u> (insert name of company) the bidder that submitted the attached bid;
(2) Affiant is fully informed respecting the preparation and contents of the attached bid and of all pertinent circumstances respecting such bid;
(3) Such bid is genuine and is not a collusive or sham bid;
(4) Neither the said Affiant nor any of his/her/its officers, partners, owners, agents, representatives, employees or parties in interest, including Affiant, has in any way colluded, conspired, connived or agreed, directly or indirectly with any other bidder, firm or person to submit a collusive or sham bid in connection with the Contract for which the attached bid has been submitted or has refrained from bidding in connection with such Contract; nor in any manner, directly or indirectly, sought by agreement or collusion or communication or conference with any other bidder, firm or person to fix the price or prices in the attached bid or of any other bidder; nor has fixed any overhead, profit or cost element of the bid price, or the bid price of any other bidder; nor has secured through any collusion, conspiracy, connivance or unlawful agreement, any advantage against the Town of Dundee or any person interested in the proposed Contract; and
(5) The price or prices quoted in the attached bid are fair and proper and are not tainted by any collusion, conspiracy, connivance or unlawful agreement on the part of the Affiant or any of its agents, representatives, owners, employees, or parties in interest.
THIS SECTION TO BE COMPLETED BY A NOTARY PUBLIC:
STATE OF Florida COUNTY OF Polk
SWORN TO AND SUBSCRIBED BEFORE ME THIS 3157 DAY OF JANUARY, 20 24
NOTARY PUBLIC: CHECK ONE PERSONALLY KNOWN TO ME_X_Produced I.D
SIGN: A DE DE DE DE LE D
PRINT: Donna DeBeck
Notary Public State of Florida

(Rev. October 2018) Department of the Treasury Internal Revenue Service

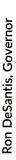
Request for Taxpayer Identification Number and Certification

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

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

	Name (as snown on your income tax return). Name is required on this line; of	to not leave this line blank.														
	SEMCO Construction, Inc. 2 Business name/disregarded entity name, if different from above						_					_				
	a business harnerdisregarded entry harne, in different from above															
page 3.	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.										Exemptions (codes apply only to certain entitles, not individuals; see					
eo p	Individual/sole proprietor or C Corporation S Corporation Partnership Trust/estate									instructions on page 3):						
9 E					Exe	npt p	ayee	code	(if a	ny)_		_				
Print or type. See Specific Instructions on	Limited liability company. Enter the tax classification (C=C corporation, S Note: Check the appropriate box in the line above for the tax classificate LLC if the LLC is classified as a single-member LLC that is disregarded for another LLC that is not disregarded from the owner for U.S. federal tax p is disregarded from the owner should check the appropriate box for the	I C. le	le le							_						
e Cit	☐ Other (see Instructions) ▶				(Арря	es to ac	counts	meinte	ined c	utuide	the U.S.J					
છે	5 Address (number, street, and apt. or suite no.) See Instructions.	Rec	uester's	name a	and ac	idres	s (op	tional)			-				
96	205 Century Blvd															
٠,	6 City, state, and ZIP code															
	Bartow, FL 33830															
	7 List account number(s) here (optional)											=				
					27											
Par	Taxpayer Identification Number (TIN)											-				
Enter	our TIN in the appropriate box. The TIN provided must match the nar	ne given on line 1 to avoid	So	cial se	curity	num	ber									
backu	p withholding. For individuals, this is generally your social security nur nt alien, sole proprietor, or disregarded entity, see the instructions for	nber (SSN). However, for a			7							٦				
entitie	s, it is your employer identification number (EIN). If you do not have a	number, see How to get a			_ -			-								
ΠN, la		,	or					12 .72			(1)	_				
Note:	If the account is in more than one name, see the instructions for line 1	. Also see What Name and	Em	ployer	ident	ificat	ion n	umb	er							
MUTTIO	or To Give the Requester for guidelines on whose number to enter.		5	9	- 1	5	7	0	0	6	7					
	O PER PE			<u> </u>	┙.					ı		_				
Part												_				
	penalties of perjury, I certify that:															
2. I am Sen	number shown on this form is my correct taxpayer identification num not subject to backup withholding because: (a) I am exempt from ba- rice (IRS) that I am subject to backup withholding as a result of a failu- onger subject to backup withholding; and	ckup withholding, or (b) I ha	ve not b	een n	otifie	d hv	the I	nten	nal i	Reve	nue at I am					
3. I arr	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 exemp	pt from FATCA reporting is	correct.													
you ha acquisi other ti	cation instructions. You must cross out item 2 above if you have been not falled to report all interest and dividends on your tax return. For real estion or abandonment of secured property, cancellation of debt, contribution in interest and dividends, you are not required to sign the certification, but an interest and dividends, you are not required to sign the certification, but are not required to sign the certification.	tate transactions, item 2 doe ons to an individual retiremen	s not ap	ply. Fo	r mor	tgag	e inte	erest	palo	i,	nte	•				
Sign Here	Signature of U.S. person ▶	Date	3	-15	-6	23										
Ger	eral Instructions	 Form 1099-DIV (divider funds) 	nds, incl	luding	thos	e fror	n sto	cks	or r	nutu	ai	-				
Section noted.	references are to the Internal Revenue Code unless otherwise	 Form 1099-MISC (various types of income, prizes, awards, or gross proceeds) 														
related	developments. For the latest information about developments to Form W-9 and its instructions, such as legislation enacted	Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)														
	ey were published, go to www.irs.gov/FormW9.	• Form 1099-S (proceed:	s from re	al est	ate tr	ansa	ction	(ar								
Purp	ose of Form	• Form 1099-K (merchan							anse	actio	ns)					
informa	vidual or entity (Form W-9 requester) who is required to file an tion return with the IRS must obtain your correct taxpayer	 Form 1098 (home mortgage interest), 1098-E (student loan interest 1098-T (tuition) 														
identifi	cation number (TIN) which may be your social security number	• Form 1099-C (canceled	l debt)													
taxpay	individual taxpayer identification number (ITIN), adoption or identification number (ATIN), or employer identification number	 Form 1099-A (acquisition 														
(EIN), to amoun	o report on an information return the amount paid to you, or other treportable on an information return. Examples of Information	Use Form W-9 only if y alien), to provide your co	rect TIN	4.												
	include, but are not limited to, the following. 1099-INT (interest earned or paid)	If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding.														

later.



Melanie S. Griffin, Secretary



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

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

LOCKE, CARL EDWARD JR

SEMCO CONSTRUCTION INC 205 CENTURY BLVD BARTOW FL 33830

LICENSE NUMBER: CGC040492

EXPIRATION DATE: AUGUST 31, 2024

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.

POLK COUNTY LOCAL BUSINESS TAX RECEIPT

ACCOUNT NO. 11320 CLASS: B+ **EXPIRES:** 09/30/2024 OWNER NAME LOCATION **205 CENTURY BLVD** CARL EDWARD SR - CERT LOCKE BARTOW

BUSINESS NAME AND MAILING ADDRESS

SEMCO CONSTRUCTION INC SEMCO CONSTRUCTION INC CARL E LOCKE SR - ST CERT 205 CENTURY BLVD BARTOW, FL 338307705

CODE **ACTIVITY TYPE**

230250 CONTRACTOR ROOFING CONTRACTOR GENERAL 230150

PROFESSIONAL LICENSE (IF APPLICABLE)

OFFICE OF JOE G. TEDDER, CFC * TAX COLLECTOR

THIS POLK COUNTY LOCAL BUSINESS TAX RECEIPT MUST BE CONSPICUOUSLY

DISPLAYED AT THE BUSINESS LOCATION

PAID - 1658382 07/19/2023 OPY

OLP 57.75

SEMCO CONSTRUCTION INC



CERTIFICATE OF LIABILITY INSURANCE

9/21/2023

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 Producin Known Shormon Bortners LLC		CONTACT NAME: Angel.McGhee@Bks-Partners.com				
Baldwin Krystyn Sherman Partners LLC 1115 Bartow Rd		PHONE (A/C. No. Ext): 863-686-2113	FAX (A/C, No): 863-682	-6292		
Lakeland FL 33801		E-MAIL ADDRESS: Angel.McGhee@BKS-Partners.com				
		INSURER(S) AFFORDING COVERAGE		NAIC#		
Lio		INSURER A: Westfield Insurance Company		24112		
INSURED	SEMCCON-01	INSURER B: Travelers Property Casualty Co		25674		
SEMCO Construction, Inc. 205 Century Blvd.		INSURER c : Bridgefield Employers Insuranc		10701		
Bartow FL 33830-7705		INSURER D : Indian Harbor Insurance Compan		36940		
		INSURER E :				
		INSURER F:				

COVERAGES CERTIFICATE NUMBER: 2081013665 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.

NSR LTR		TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S
Α	Х	CLAIMS-MADE X OCCUR	Y		CMM5025462	10/1/2023	10/1/2024	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000 \$ 500.000
	Х	\$500 PD Ded						MED EXP (Any one person)	\$5,000
								PERSONAL & ADV INJURY	\$ 1,000,000
	GEN	LAGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 2,000,000
		POLICY X PRO- X LOC						PRODUCTS - COMP/OP AGG	\$2,000,000
		OTHER:							\$
Α	AUT	OMOBILE LIABILITY	Y		CMM5025462	10/1/2023	10/1/2024	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	Х	ANY AUTO						BODILY INJURY (Per person)	\$
		OWNED SCHEDULED AUTOS AUTOS					ľ	BODILY INJURY (Per accident)	\$
	Х	AUTOS ONLY X NON-OWNED AUTOS ONLY					ì	PROPERTY DAMAGE (Per accident)	\$
	Х	PIP						PIP	\$ 10,000
В	Х	UMBRELLA LIAB X OCCUR			CUP7S00355023NF	10/1/2023	10/1/2024	EACH OCCURRENCE	\$ 5,000,000
-		EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$ 5,000,000
		DED X RETENTION \$ 10,000							\$
		KERS COMPENSATION EMPLOYERS' LIABILITY			83034747	10/1/2023	10/1/2024	X PER OTH-	
		PROPRIETOR/PARTNER/EXECUTIVE N	N/A					E.L. EACH ACCIDENT	\$ 1,000,000
- 1	(Man	datory in NH)						E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
	DES	, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	s 1,000,000
Å	Profe	ed or Leased Equipment essional/Pollution Liability ers Risk - Reporting			CMM5025462 PEC005848702 CMM5025462	10/1/2023 10/1/2023 10/1/2023	10/1/2024 10/1/2024 10/1/2024	\$300,000 Llmit \$1,0000 Llmit \$2,745,000 Limit	\$500 Deductible \$25K/\$10K Ded \$2,500 Deductible

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

Certificate Holder The Town of Dundee its Affiliates and or Assigns are included as Additional Insured with respect to general liability and auto liability on a primary and non- contributory basis as required by written contract and subject to terms, conditions and exclusions of the policy. 30 days notice of cancellation applies except 10 for non payment of premium.

CERTIFICATE HOLDER	CANCELLATION
The Town of Dundee, Florida 202 E. Main Street	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Dundee FL 33838	Soundh lehr

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AFFIDAVIT CERTIFICATION IMMIGRATION LAWS

THE TOWN OF DUNDEE, FLORIDA, WILL NOT INTENTIONALLY AWARD TOWN CONTRACTS TO ANY CONTRACTOR WHO KNOWINGLY EMPLOYS UNAUTHORIZED ALIEN WORKERS, CONSTITUTING A VIOLATION OF THE EMPLOYMENT PROVISIONS CONTAINED IN <u>8 U.S.C. SECTION 1324 a(e)</u> AND/OR SECTION 274A(e) OF THE IMMIGRATION AND NATIONALITY ACT ("INA").

THE TOWN OF DUNDEE, FLORIDA, MAY CONSIDER THE EMPLOYMENT BY ANY CONTRACTOR OF UNAUTHORIZED ALIENS A VIOLATION OF SECTION 274A(e) OF THE INA. SUCH VIOLATION BY THE RECIPIENT OF THE EMPLOYMENT PROVISIONS CONTAINED IN SECTION 274A(e) OF THE INA SHALL BE GROUNDS FOR UNILATERAL CANCELLATION OF THE CONTRACT BY THE TOWN OF DUNDEE.

BIDDER ATTESTS THAT THEY ARE FULLY COMPLIANT WITH ALL APPLICABLE IMMIGRATION LAWS (SPECIFICALLY TO THE 1986 IMMIGRATION ACT AND SUBSEQUENT AMENDMENTS).

Company Name SEMCO Construction, Inc.
Signature Date: 1-31-2024
Printed Name Jennifer Hall
Title Executive Vice President
PRIVATE PROVIDER FIRM
THIS SECTION TO BE COMPLETED BY A NOTARY PUBLIC:
STATE OF Florida COUNTY OF Polk
SWORN TO AND SUBSCRIBED BEFORE ME THIS 3157 DAY OF JANUARY, 20 24
NOTARY PUBLIC: CHECK ONE PERSONALLY KNOWN TO ME_X_Produced I.D
SIGN: A D. P. D. P. A.
PRINT: Donna DeBeck
AN All Marian Dublic State of Elevide

CERTIFICATION OF DRUG-FREE WORKPLACE

I Jennifer Hall ("Undersigned"), certify that:

- (1) Undersigned is Executive VP (insert job title) and duly authorized to act on behalf of the Contractor SEMCO Construction, Inc. that submitted the attached bid.
- (2) Undersigned acknowledges that Preference shall be given to businesses with drugfree workplace programs.
- (3) Undersigned acknowledges that whenever two (2) or more bids which are equal with respect to price, quality, and service are received by the Town for the Purchasing of commodities or contractual services, a bid received from a business that certifies that it has implemented a drug-free workplace program shall be given preference in the award process.
- (4) In order to have a drug-free workplace program, a business shall:
 - (a) Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in-the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
 - (b) Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
 - (c) Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (a).
 - (d) In the statement specified in subsection (a), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of Chapter 893 of the Florida Statutes or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
 - (e) Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
 - (f) Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

O , I	erson authorized to sign this CERTIFICATION OF DRUG-FREE by certify that the Contractor, <u>Jennifer Hall</u>
, acknowledges, un	derstands, and complies fully with the above requirements.
DATE: 1-31-	2024 NAME OF ENTITY: SEMCO Construction, Inc.
•	
PHONE/FAX:	962 522 7102 / 962 522 2276
FHUNE/FAX.	863-533-7193 / 863-533-3376
ADDRESS:	205 Century Blvd.
	Bartow, FL 33830
	2.2.0.1,2.2.0000
	Ab se
SIGNATURE:	Cy V
PRINT NAME:	Jennifer Hall

SALES TAX SAVINGS FORM

CONTRACT NUMBER:	RFP 24-04		
NAME OF PROJECT:	Renovations to Dundee Community Center		

MATERIALS	(1) Amount in Contract	(2) Sales Tax	(3) Net Amount
Material list will b	e provided upon award.		

- (1) This is the amount to be deducted from contract by change order.
- (2) The amount of the sales tax included in the material purchase line item supplied by the Contractor.
- (3) The amount to be used by the Town to make the material purchase per the Contractor's stated quantities.