



STAFF REPORT

Regular Commission Meeting

May 23, 2024

To: Elected Officials

From: Dale L. Martin, City Manager

Date: May 23, 2024

Item Name: Consider awarding Bid No. FB-2024-0501 to North Florida Waste Management, the apparent low bidder, in the amount of \$44,000 for the demolition of three (3) in-ground water tanks.

Background: Bid No. FB-2024-0501 Water Treatment Plant Demolition Project was distributed to nineteen vendors. Of those, four submitted bids for the demolition of three (3) in-ground water tanks, fill & grade after removal, and trucking the debris to a licensed disposal facility. Since this project is not grant- or federally-funded, the local preference option applied during review. It should be noted even with the 5% preference of the one local bidder (Samsula Demolition), the lowest, most responsive bid is North Florida Waste Management in the amount of \$44,000.

Fiscal Impact: Line Item 401-5331-606300 contains \$70,000 for the demolition project.

Staff Recommendation: The Water Plant Supervisor has spoken to references and recommends the award to North Florida Waste Management.

Attachments: Bid Tabulation, Notice of Intent to award, legal advertisement, Scope of Work, bidders' insurance, Addendum No. 1

Member Name
 Bid Number
 Bid Name

2 Document(s) found for this bid

17 Planholder(s) found

SupplierName	Bid Amount	Email	Address1	City	State	PostalCode	Phone
A.G. Pifer Construction Co., Inc.		agPiferinc@gmail.com	3629 Old Deland Rd	Daytona Beach	FL	32124	3862574448
AC Plus Marine, Inc.		Cyndie.Phillippe@acplusmarine.com	3605 Commerce Blvd., Suite B	Kissimmee	FL	34741	4078191315
cathcart construction company - florida, LLC		cathcart01@yahoo.com	1056 WILLA SPRINGS DRIVE	Oviedo	FL	32708	4073416465
CWS		ray.mccloskey@clearwatersol.com	3780 NE 40th Place	Ocala	FL	34479	3523906555
D&S Steel inc		dssteel.istancil@gmail.com	177 Anclote Rd	Tarpon Springs	FL	34689	7279389500
Dodge Data		dodge.docs@construction.com	4300 Beltway Place, Ste 150	Arlington	TX	76018	4133767032
Ferreira Construction Company Inc.		tinog@ferreiraconstruction.com	31 Tannery Rd	Hobe Sound	FL	08876	7722865123
Freedom Waste Management		service@freedomwastemgt.com	2220 CR 210 West Suite 108 pmb 35	Saint Johns	FL	32259	9043370066
Gulf Stream Contracting		Mitch@gulfstreamcontracting.com	3773 72nd st	Live Oak	FL	32060	9042191139
Hobbs Site Development		thetractorman2005@yahoo.com	395 N Holmes Blvd.	Saint Augustine	FL	32084	9046691300
Intercounty Engineering, Inc		smcdougale@intercountyengineering.com	1030 4 Court SW	Vero Beach	FL	32962	7726338242
Leopard Project Controls, LLC		info@consultleopard.com	232 Gentian Road	Saint Augustine	FL	32086	8337776276
McMahan Construction Co., Inc.		dkellogg@mcmahanfl.com	123 E. Indiana Ave	Deland	FL	32724	3867341071
Onvia, Inc. - Content Department		sourcingsupport@deltek.com	509 Olive Way, Suite 400	Seattle	WA	98101	2063739500
Precision Development Group		mcquaigtrucking@gmail.com	380 Sisco Road	POMONA PARK	FL	32181	9048143243
r2r demolition inc	\$52,000	r2rdemolitioninc@gmail.com	2421 ne 8th ter	pompano beach	FL	33064	7865607219
Southeastern Construction and Maintenance		LuisE@secm.com	1150 Pebbledale Rd.	Mulberry	FL	33860	8634275327
Razorback, LLC	\$470,000		177 Anclote Rd.	Tarpon Springs	FL	34689	7279389500
North FL Waste Management	\$44,000	Tony2ajni@gmail.com	3633 Lenox Ave	Jacksonville	FL	32254	9048815848
Samsula Demolition	\$72,000	OFFICE@SAMSULADEMOLITION.COM	363 s State Rd 415	New Smyrna Beach	FL	32168	3864236769



City of Flagler Beach

P.O. Box 70 • 105 South Second Street

Flagler Beach, Florida 32136

Phone (386) 517-2000 • Fax (386) 517-2016

MEMO

DATE: May 20, 2024

TO: r2r Demolition, Razorback, LLC, Samsula Demolition, North FL Waste Management

FROM: Penny Overstreet, City Clerk

SUBJECT: Recommendation to award City of Flagler Beach Bid No. FB 2024-0501 Water Treatment Plant Demolition Project

Memo containing the recommendation of award for the Flagler Beach Bid No. FB 2024-0501 Water Treatment Plant Demolition Project

The advertisement for the Invitation to Bid on the above referenced project ran as a legal ad one time in a newspaper of general circulation, the Daytona Beach News Journal, on Monday, April 15, 2024, as well as on the City's web site, and Demand Star. The number of vendors the City directed the Bid Package to was nineteen (19), of those recipients four (4) responded with bids. After a detailed review by Staff of the respondents bid packages and supporting documents, Staff recommends the City Commission award the Project to North FL Waste Management the lowest most responsible bid at \$44,000.

AFFIDAVIT OF PUBLICATION

Penny Overstreet
City Of Flagler Beach-Hr
Po Box 70
Flagler Beach FL 32136-0070

STATE OF WISCONSIN, COUNTY OF BROWN

Before the undersigned authority personally appeared, who on oath says that he or she is the Legal Coordinator of The News-Journal, published in Volusia and Flagler Counties, Florida; that the attached copy of advertisement, being a Govt Bids & Proposals, was published on the publicly accessible website of Volusia and Flagler Counties, Florida, or in a newspaper by print in the issues of, on:

04/15/2024

Affiant further says that the website or newspaper complies with all legal requirements for publication in chapter 50, Florida Statutes.

Subscribed and sworn to before me, by the legal clerk, who is personally known to me, on 04/15/2024

Legal Clerk

Notary, State of WI, County of Brown

My commission expires

Publication Cost: \$164.72

Order No: 10066899

of Copies:

Customer No: 465673

1

PO #:

THIS IS NOT AN INVOICE!

Please do not use this form for payment remittance.

VICKY FELTY
Notary Public
State of Wisconsin

City of Flagler Beach
Seeking Bids for
Bid # FB-24-30-04
For the Water Treatment Plant
Demolition Project
Bid Closing 3:00 P.M. EST,
Wednesday, May 01, 2024

Sealed bids for all labor, materials, tools and equipment necessary to demolish three (3) in-ground water tanks, fill & grade after removal, and truck debris to a licensed disposal facility.

Interested firms may secure the specifications, bid forms, and all other pertinent information by visiting the website: www.cityofflaglerbeach.com. Or on www.demandstar.com.

For further information, contact: Penny Overstreet, City Clerk, poverstreet@cityofflaglerbeach.com (preferred), (386) 517-2000, ext. 233.

Bids must be addressed to the attention of Penny Overstreet, City Clerk.

Bids must be received on or before May 01, 2024, 3:00 PM.

The City of Flagler Beach reserves the right to reject any and all Bids, to award all or segments of the project, and to waive any informality in Bids received, as may be in the best interest of the City.

L#10066899 4/15/24 11

Received
APR 24 2024

City of Flagler Beach



Work Write-Up / Bid Form

Water Treatment Plant Demolition Project

Bid No. FB-2024-0501

The work write-up / bid form is a general outline of the work to be performed including identification of alternate pricing. The base price of this project shall include:

DATE: 4/30/24

TOTAL BASE BID: \$ 44,000.⁰⁰

DATE CONTRACTOR CAN BEGIN WORK: Immediately

TIME NEEDED TO COMPLETE PROJECT: 2 weeks

All work to be performed in a professional manner, in accordance with the project drawings, specifications, local codes, and manufacturer's specifications. The contractor shall be responsible for the repairs and/or reinstallation of materials, equipment, and fixtures which damaged or removed during the course of construction. All items must be cost itemized in the space provided or the bid will be rejected.

I hereby certify that I am licensed by the State of Florida, Department of Business and Professional Regulation.

CONTRACTOR'S SIGNATURE: 

CONTRACTOR'S PRINTED NAME: Tony Zajni

CONTRACTOR'S BUSINESS ADDRESS: 3633 Lenox Ave.
Jacksonville FL 32254

CONTRACTOR'S PHONE NUMBER: 904-881-5848

THIS PAGE MUST BE INCLUDED WITH THE BID FOR IT TO BE VALID.



ZAJNITO001

GARCIA)

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

Insurance Office of America
1855 West State Road 434
Longwood, FL 32750

CONTACT NAME: Cheryl Joynt

PHONE (A/C, No, Ext): (407) 998-5588

FAX (A/C, No):

E-MAIL ADDRESS: Cheryl.Joynt@ioausa.com

INSURED

North Florida Waste Management
3633 Lenox Avenue
Jacksonville, FL 32254

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A : Allied World Surplus Lines Insurance Company 24319

INSURER B : Trisura Specialty Insurance Company 16188

INSURER C : AXIS Insurance Company 37273

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 SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X	5054-1756-02	9/10/2023	9/10/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY <input checked="" type="checkbox"/> PIP \$10,000		MIW-BUR21C027-113	9/10/2023	9/10/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000		5056-0581-02	9/10/2023	9/10/2024	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N If yes, describe under DESCRIPTION OF OPERATIONS below	N / A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
C	Cyber Liability		TPP1728248-00-0511	9/10/2023	9/10/2024	Limit 250,000
B	Physical Damage		MIW-BUR21C027-113	9/10/2023	9/10/2024	Comp/Collision 325,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Physical Damage deductible: \$5,000 Actual Cash Value
PIP \$10,000

A) Contractor's Pollution Liability
Limits: Aggregate Limit: \$2,000,000 / Each Occurrence Limit: \$1,000,000
Effective Dates: 9/10/2023 - 9/10/2024

SEE ATTACHED ACORD 101

CERTIFICATE HOLDER

City of Flagler Beach
105 S 2nd Street
P.O. Box 70
Flagler Beach, FL 32136

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

ACORD 25 (2016/03)



AGENCY CUSTOMER ID: ZAJNITO001

GARCIAX

LOC #: 1

ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY Insurance Office of America		NAMED INSURED North Florida Waste Management	
POLICY NUMBER SEE PAGE 1		3633 Lenox Avenue	
CARRIER SEE PAGE 1		Jacksonville, FL 32254	
NAIC CODE SEE P 1		EFFECTIVE DATE: SEE PAGE 1	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Description of Operations/Locations/Vehicles:

The City of Flagler Beach, elected officials and employees are named as additional insured in regards to General Liability. A waiver of subrogation applies in favor of The City of Flagler Beach, elected officials and employees.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/01/2024

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 BIBERK P.O. Box 113247 Stamford, CT 06911	CONTACT NAME:	PHONE (A/C, No, Ext): 844-472-0967	FAX (A/C, No): 203-654-3613
	E-MAIL ADDRESS: customerservice@biBERK.com		
INSURED NORTH FLORIDA WASTE MGT 525 WETHERBY LN Jacksonville, FL 32254	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : Berkshire Hathaway Direct Insurance Company		10391
	INSURER B :		
	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	
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE	\$ 0
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 0
							MED EXP (Any one person)	\$ 0
							PERSONAL & ADV INJURY	\$ 0
							GENERAL AGGREGATE	\$ 0
							PRODUCTS - COMP/OP AGG	\$ 0
								\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
	UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE	\$
							AGGREGATE	\$
								\$
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 N	N/A	N9WC726855	07/28/2023	07/28/2024	X PER STATUTE E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	\$2,000,000 \$2,000,000 \$2,000,000
	Professional Liability (Errors & Omissions): Claims-Made						Per Occurrence/ Aggregate	

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

CERTIFICATE HOLDER

CANCELLATION

CITY OF FLAGLER BEACH
105 SOUTH 2ND STREET
PO BOX 70
Flagler Beach, FL 32136

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

Patel Gya