Bid Form

RFP No. 2024-04, DESIGN/BUILD - RIVERS HOUSE RENOVATION

Lump Sum Price for Demolition and/or Replace/Repair of the following specific scopes of work. If not included below then it is specifically excluded from the Bid:

- Front Porch: Remove 1x4 Decking and Damaged 2x8 Floor Joists, Replace Damaged 2x8
 Floor Joists, Install New PT 2x4 for Decking, Frame New Stairs on Right Side of the Porch,
 Install Porch Handrails, Replace the Trim on 1 Column, Remove and Replace two 2x12
 headers at the Outside Edge of the Porch
- 2. Sleeping Porch; Remove Exterior Wall Panels that were added between Columns, install two new Concrete Piers to Add Support to Porch, Add Pressure Treated Wood to Joists and Beams, Add Metal Hangers (where accessible) at Beam-to-Joist Connections,
- 3. Demolition of the Addition on Right Side of Building
- 4. Reclaim as much Good Siding Material from Demolition Noted in #3 above as possible and Reuse.
- 5. Apply Two Coats of White Exterior Sherwin Williams Paint on Exterior Walls of Building, No Surface Preparation is Included Other Than Pressure Washing
- 6. Replace damaged lattice skirt board around exterior at crawl space
- 7. City will provide temporary: power, water, and sanitary at the project site
- 8. No Permitting Fees are Included
- 9. No guarantee of: exact match to existing conditions or for remodel to be historically correct

Date: 7/16/24

Total Price Written in Words: Two Hundred Twenty Five Thousand Dollars (\$225,000)

Proposals may not be withdrawn after the scheduled opening time for a period of sixty (60) days.

Failure to complete all fields may result in your bid being rejected as non-responsive.

CORPORATE DETAILS:

COMPANY NAME: Bourre Construction Group

ADDRESS: 3168 Highway 17 South, Suite B, Fleming Island Fl. 32003

TELEPHONE: 904 602-5220

EMAIL: mbourre@bourreconstructiongroup.com

CONTRACTOR LICENSE #: CGC1508608

Name of Person submitting Bid: Michael Bourre

Title: President

Signature:

STATEMENT OF BIDDER'S QUALIFICATIONS

All questions must be answered and the data given must be clear and comprehensive. If necessary, questions may be answered on separate attached sheets. The Bidder may submit any additional information he desires.

- 1. Name of bidder. Bourre Construction Group
- 2. Permanent main office address. 3168 Hwy 17 South, Suite B, Fleming Island Fl. 32003
- 3. Copy of licenses required to perform work. See Attached
- 4. Date firm was organized. 2/10/2005
- 5. How many years have you been engaged in the contracting business under your present firm or trade name? 19 years
- 6. Contracts on hand: (Schedule these, showing amount of each contract and the appropriate anticipated dates of completion). N/A
- 7. Have you ever failed to complete any work awarded to you? No
- 8. Have you ever defaulted on a contract? No
- 9. List the more important projects recently completed by your company, stating the approximate cost for each, and the month and year completed. Clay Habitat Office, 500,000, 2024
- 10. List your major equipment available for this project. N/A
- 11. Experience in construction work similar in importance to this project. 19 years of Commercial and
- 12. Background and experience of the principal members of your organization, including the officers. See Resume Attached
- 13. Credit available: \$_N/A_____.
- 14. Give bank reference. N/A
- 15. Will you, upon request, fill out a detailed financial statement and furnish any other information that may be required by the County? N/A
- 16. The undersigned hereby authorizes and request any person, firm, or corporation to furnish any information requested by the County in verification of the recitals comprising this Statement of Bidder's Qualifications.

Bidder For Bourre Construction Group 7/16/24

Date

DRUG-FREE WORKPLACE COMPLIANCE FORM

In order to have a drug-free workplace program, a business shall abide as follows:
The undersigned vendor/contractor in accordance with Florida Statue 287.087 hereby certifies that Bourse Construction Group (name of business) does:

- 1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
 - 2. Inform employees about the dangers of drug abuse in the workplace, the company'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 or drug abuse violations.
 - 3. Give each employee engaged in providing the commodities or contractual services that are under proposal a copy of the statement specified in item 1, above.
 - 4. In the statement specified in item 1, notify the employees that as a condition of working on the commodities or contractual services which are under proposal, 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 1893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
 - 5. Impose a sanction on or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is convicted.
 - 6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

As the person authorized to sign t	he statement, I certify that, Bource Construction
above requirements.	(name of business), fully complies/does not comply with the
Jus	7/16/24
Vendor/Contractor Signature	Date

STANDARD ADDENDUM TO ALL CITY CONTRACTS AND AGREEMENTS

Any other provisions of the Contract or Agreement to which this Standard Addendum is attached to the contrary notwithstanding, the parties specifically agree that the provisions hereinafter set forth will apply exclusively with respect to the matters addressed, whether addressed in said Contract or Agreement or not, and shall be deemed an integral part of said Contract or Agreement as if duly set out therein, having a force and effect of equal or superior dignity, as applicable, with the provisions thereof; provided, that if the provisions of the Contract or Agreement address a particular matter in a manner which results in a lower cost to the City than this Standard Addendum, then such provisions of the Contract or Agreement shall control and supersede the applicable provisions hereof (as used herein, the term "Contractor" means the vendor or other party in the Contract or Agreement providing construction, labor, materials, professional services, and/or equipment to the City thereunder; the term "City" means Green Cove Springs, a municipal corporation of the State of Florida, its City Council, or any other name or label set forth in the Contract or Agreement identifying such entity).

- 1. All payments for services rendered, or supplies, materials, equipment and the like constructed, delivered, or installed under the Contract or Agreement (the Work) shall be made by the City in accordance with the Local Government Prompt Payment Act (the Act). Upon receipt of a proper statement, invoice or draw request, the City shall have the number of days provided in the Act in which to make payment.
- 2. Any work or professional services sub-contracted for by the Contractor for which the City has agreed to reimburse the Contractor shall not be marked up but shall be payable by the City only in the exact amount reasonably incurred by the Contractor. No other such sub-contracted services shall be reimbursed.
- 3. In the event the Contract or Agreement is for professional services, charged on a time basis, the City shall not be billed or invoiced for time spent traveling to and from the Contractor's offices or other points of dispatch of its sub-contractors, employees, officers, or agents in connection with the services being rendered.
- 4. The City shall not be liable to reimburse the Contractor for any courier service, telephone, facsimile, or postage charges incurred by the Contractor, except as follows, and then only in the exact amount incurred by the Contractor [if the space below is left blank, then "NONE" is deemed to have been inserted therein]:
- 5. The City shall not be liable to reimburse the Contractor for any copying expenses incurred by the Contractor, except as follows, and then only at \$0.05 per page [if the space below is left blank, then "NONE" is deemed to have been inserted therein]:
- 6. If and only if travel and per diem expenses are addressed in the Contract or Agreement in a manner which expressly provides for the City to reimburse the Contractor for the same, then the City shall reimburse the Contractor only for those travel and per diem expenses reasonably incurred and only in accordance with the provisions of Section 112.061, Florida Statutes or as otherwise limited by Florida law. In the event the Contractor has need to utilize hotel accommodations or common carrier services, the City shall reimburse the

HCREWS



CERTIFICATE OF LIABILITY INSURANCE

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).

	is certificate does not confer rights to				ich end	lorsement(s)			it. A S	tatement on
PRO	DUCER					CT Debbie C	assady, Cl	C, AAI		
	uramerica of Florida, Inc. 8 Southpoint Blvd Ste 200					o, Ext): (904) 5			(904)	296-1888
Jac	ksonville, FL 32216				E-MAIL ADDRE	ss: dcassad	y@insuram	nerica-fl.com		
						INS	URER(S) AFFOR	RDING COVERAGE		NAIC#
					INSURE	R A : Special	ty Builders	Insurance Company		16826
INSL	JRED				INSURE	RB: America	an Builders	Insurance Company		11240
	Bourre Construction Group,	LLC	;		INSURE	RC:				
	PO Box 8070 Fleming Island, FL 32006-00	00			INSURE	RD:				
	Fleming Island, FL 32006-00	UO			INSURE	RE;				
				500 500 500 500	INSURE	RF;				
	-C	-		E NUMBER:				REVISION NUMBER:		
C	HIS IS TO CERTIFY THAT THE POLICIE IDICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	EQU PER	IREMI TAIN,	ENT, TERM OR CONDITION , THE INSURANCE AFFORD	N OF A	NY CONTRAC	CT OR OTHER ES DESCRIB	R DOCUMENT WITH RESPE ED HEREIN IS SUBJECT 1	ECT TO	WHICH THIS
INSR			SUBR			POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
A	X COMMERCIAL GENERAL LIABILITY	111275	1110			(1111/05/1111)	(IIIII//OD/11111)	EACH OCCURRENCE	s	1,000,000
	CLAIMS-MADE X OCCUR	х		PKG034090501		1/31/2024	1/31/2025	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	\$	2,000,000
	POLICY X PRO-							PRODUCTS - COMP/OP AGG	\$	2,000,000
	OTHER:								\$	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$	
	ANY AUTO						12.	BODILY INJURY (Per person)	\$	
	OWNED AUTOS ONLY SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$	
	HIRED AUTOS ONLY AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$	
			-						\$	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$	
В	DED RETENTION\$							X PER OTH-	\$	
5	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WCV014151512		1/31/2024	1/31/2025			500,000
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT	\$	500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE		500,000
	DESCRIPTION OF OPERATIONS below		-					E.L. DISEASE - POLICY LIMIT	\$	
DES Mich	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL ael Bourre is exempt from Workers Coi	ES (Amper	ACORD	⊔ 101, Additional Remarks Schedul IN	le, may b	e attached if more	a space is requir	ed)		
CEI	DIFFICATE HOLDED				CANC	ELL ATION				
CEI	RTIFICATE HOLDER				CANC	ELLATION				
City of Green Cove Springs 321 Walnut Street Green Cove Springs, FL 32043			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.							
C. C			AUTHORIZED REPRESENTATIVE ACCORDANY							

Contractor for his, her, or its reasonable expense incurred thereby provided prior written approval of the City Manager of the City or his or her designee is obtained.

- 7. With respect to drawings and/or plans prepared on behalf of the City by the Contractor under the Contract or Agreement, unless specifically provided otherwise therein, complete sets of such drawings and/or plans shall be reproduced by the Contractor without cost to the City for all bidders requesting the same, and five (5) complete sets of such drawings and/or plans shall be reproduced and delivered to the City without cost.
- 8. With respect to any indemnification by the City provided under the Contract or Agreement, any such indemnification shall be subject to and within the limits set forth in Section 768.28, Florida Statutes, and shall otherwise be limited as provided by law.
- 9. In that the City is a governmental agency exempt from sales tax, the City shall pay no such taxes, any other provisions of the Contract or Agreement to the contrary notwithstanding. The City shall provide proof of its exempt status upon reasonable request.
- Any pre-printed provisions of the Contract or Agreement to the contrary notwithstanding, the same shall <u>not</u> automatically be renewed but shall be renewed only upon subsequent agreement of the parties.
- 11. The Contractor acknowledges that in the budget for each fiscal year of the City during which the term of the Contract or Agreement is in effect, a limited amount of funds are appropriated which are available to make payments arising under the Contract or Agreement. Any other provisions of the Contract or Agreement to the contrary notwithstanding, and pursuant to applicable Florida Statutes, the maximum payment that the City is obligated to make under the Contract or Agreement from the budget of any fiscal year shall not exceed the appropriation for said fiscal year.

CITY OF GREEN COVE SPRINGS	CONTRACTOR
By: Constance Butler, Mayor	By: Michael Bource, President (Printed Name and Title)
ATTEST:	
By:Erin West, City Clerk	_

Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Form

RFP No. 2024-04, DESIGN/BUILD – RIVERS HOUSE RESTORATION

(1)	The prospective Vendor, <u>Bource Construction Group</u> , certifies, by submission of this document, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal Department or Agency.
(2)	Where the Vendor is unable to certify to the above statement, the prospective Vendor shall attach an explanation to this form.
Vend	or:
B	ourre Construction Group
By: _	Signature
	Michael Bourre, President Name and Title
ć	Street Address
	Teming Island Fl 32003 City, State, Zip
_7	/16/24 Date

SWORN STATEMENT PURSUANT TO SECTION 287.133(3)(a), <u>FLORIDA</u> STATUTES, ON PUBLIC ENTITY CRIMES

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

1.	This sworn statement is submitted to	
		(print name of the public entity)
	by Michael Bourse	
	(print individual's name an	and title)
	for Bourre Construction	Group
	(print name of entity submi	
	whose business address is 3168	Highway 17 S., Fleming Island
	Florida 32003	<u> </u>
	and (if applicable) its Federal Employ	oyer Identification Number (FEIN) is 20-2325564
(If the	entity has no FEIN, include the Social	al Security Number of the Individual signing this
sworn	statement:)

- 2. I understand that a "public entity crime" as defined in Paragraph 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any business with any public entity or with an agency or political subdivision of any other state or of the United States, including, but not limited to, any bid or contract for goods or services to be provided to any public entity or an agency or political subdivision or any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
- 3. I understand that "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
- 4. I understand that an "affiliate" as described in paragraph 287.133(1)(a), <u>Florida Statute</u>, means:
 - a. A predecessor or successor of a person convicted of a public entity crime; or b. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered affiliate.

- c. I understand that a "person" as defined in Paragraph 287.133(1)(e), Florida Statutes, means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.
- d. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. Indicate which statement applies:
- -Neither the entity submitting this sworn statement, nor any of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, nor any affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989. The entity submitting this sworn statement, or one or more of its officers, directors,

executives, partners, shareholders, employees, members, or agents who are active in the management of the entity or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

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

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IDENTIFIED IN PARAGRAPH 1 (ONE) ABOVE IS FOR THAT PUBLIC ENTITY ONLY AND, THAT THIS FORM IS VALID THOROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THE PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017, FLORIDA STATUTES FOR CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.

34	
Signature	
Sworn to and subscribed before me this day of, 20_24	
Personally know: X Title: President Bourre Construction Give	
OR produced identification Notary Public – State of Florida	°P
(Type of identification) My commission expires $3/24/25$	
SANDA KAYARANAN Sandra Kay McMandon Swimundon	
SANDRA KAY MCMANDON District of the same o	

Printed typed or stamped commissioned name of notary public

IY COMMISSION #HH108962 EXPIRES: MAR 24, 2025

Bonded through 1st State Insurance

References

Concrete	Duval Concrete	James	904 237-0061
HVAC	Fl Air	Robert	904 813-5265
Electrical	C&R Electric	Randy	904 219-0130
Plumbing	B&G Plumbing	Terry	904 223-1207

Michael Bourré President

Bourré Construction Group, LLC

3168 Highway 17 South Fleming Island Fl. 32003 904.504.1342

mbourre@bourreconstructiongroup.com

PROFESSIONAL EXPERIENCE

Bourré	Construction	Group LLC	, Jacksonville Fl
Douile	OOHSH GOROH	OLOUP ELO	, ouchount inc i i

Presid	ent	2005- Present
	Clay Habitat Offices – Green Cove Springs Fl	\$500,000
	Hodges Mazda Reconstruction-Jacksonville Fl	\$1,300,000
	Dr Orsborn Reconstruction-Jacksonville Fl	\$86,000
	Alterra Office Complex – Jacksonville, FL	\$1,200,000
	Phoenix Metal Building Complex – Jacksonville, FL	\$1,400,000
	Wounded Warrior Project World Headquarters – Jacksonville, FL	\$1,600,000
\triangleright	Circle K Retail Center – Jacksonville, FL	\$850,000
	High-end custom home Division	
\triangleright	Remodel / T.I. Division	

Florida Home Building Association

President	2019-2020
Vice President	2018
Secretary / Treasurer	2017
State Government Affairs Chairman	2015-2017
Executive Board	2011- Present

North East Florida Builders Association, Jacksonville Fl.

President	2011
Executive Board	2009-2012

Builders Care, Jacksonville Fl.

Board Member	2009- 2016
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MILAR Custom Homes Inc., Jacksonville Fl.

President / CEO 2004- 2007

- ➤ A high-end custom home company specializing in the \$900,000 home and up.
- Started the company in March of 2004 and had successfully obtained a backlog of contracted clients.
- ➤ Hired a competitive staff of well-trained individuals to ensure quality throughout the construction process and steady growth for the company.

SEDA Construction, Jacksonville, FL

2002-2004

Vice President of Production

Managed the construction department to include all Project Managers, Permitting, Warranty, Subcontractors, Vendors, etc.. Built 658 homes in 2006.

- Implemented new scheduling software which reduced build time and increased the load capability of Project Managers
- > A member of a 4 person Executive Committee which conducts weekly meetings to determine:
 - o Sales pricing
 - Quantity of new spec homes to be started
 - Marketing strategies
 - Purchasing lots in new subdivisions
 - o Manpower needs throughout the company
 - Setting and implementing new policies for the company
- Coordinated a office / field staff of 28 individuals towards achieving the company objectives

Brasfield & Gorrie, Atlanta GA

1999-2002

Project Management

- ➤ Performed and oversaw site-work, excavation, footings, placing reinforcing steel, pile and pile caps, placing concrete slabs and footings, masonry walls, steel erection, column erection, wood framing, and finances on commercial construction projects.
- ➤ Georgia Department of Archives and History: This was a 4-story vault with a 3-story office building wrapped on two sides to house state documents, including the State Constitution. The project had a schedule of 17 months to complete and cost approximately \$22,500,000. As one of two project managers on-site, I was responsible for all aspects of the construction project.
- ➤ **Childkind:** This was a childcare facility comprised of 2 buildings on a 4-acre site. The construction process took 6 months and cost approximately \$1,200,000. I controlled all management aspects of this project from the contracts to coordination of owner and architect to scheduling, cost control, and permitting.
- ➤ METLIFE: This was 7-story, 161,000 sf office building that housed the METLIFE Insurance corporate office in Atlanta. This project took approximately 12 months to complete and priced out at \$11,600,000. I was one of two project mangers onsite and was responsible for subcontractor contracts, the construction schedule, material procurement, and coordination of the subcontractors.
- ➤ City View: This was 10-story building with a parking deck. I came in on this structure during the last two months and was responsible for closeout and punch list.
- North Park 600: this was an 18 story office complex. I was part of a five-person team charged with the oversight of all aspects of construction. Our office was onsite with the project and we coordinated all subcontractors and scopes of work.

Estimator

➤ Part of the estimating team handling hard bid and negotiated projects ranging from \$5,000,000 to \$80,000,000.

Charles Perry Construction, Gainesville, FL

1998-1999

2002

Internship

- > Assisted the project manager on a \$5,000,000 Millennium building.
- > Reviewed and coordinated subcontractor scheduling.
- > Conducted the submittal process for items to be reviewed by the architect

EDUCATION

> Florida General Contractors Exam 2003

OSHA Training, Brasfield & Gorrie / St. Paul Insurance, 10 hour

University of Florida, Gainesville, FL
 M.E. Rinker School of Building Construction, Bachelors Degree
 United States Marine Corps
 1997- 1999
 1992- 1999

ACHIEVEMENTS

- ➤ Recognized by the Jacksonville Business Journal as one of the 2011 Northeast Florida's Top 40 Professionals Under 40
- Pinnacle Builder
- > 2011 Grand Laurel Award
- > 2011 Leadership Award
- > 2011 Gold Award, Parade of Homes
- > 2008 Judges Choice, Parade of Homes
- > 2007 Gold Award, Parade of Homes
- > Honor Graduate, United States Marine Corps
- > Eagle Scout

COMMUNITY SERVICE

Appointed Planning and Zoning Commissioner for Clay County	2014-Present
Gubernatorial Appointed Regional Planning Council Member	2016
Boy Scouts Committee Chairman	2013-2016
Boy Scouts Scoutmaster	2016



DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION STATE OF FLORIDA

CONSTRUCTION INDUSTRY LICENSING BOARD

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

BOURRE, MICHAEL PAUL

BOURRE CONSTRUCTION GROUP_LLC
PO BOX 8070

FLEMING ISLAND FL 32006

LICENSE NUMBER: CGC1508608

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.

Form (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.

	A Maria Landa de la Companya de la C	making a Abia III - Arabia				_	_	_	_	_		_	_
	1 Name (as shown on your Income tax return), Name is required on this line; do	not leave this line blank.											
	Bourre Construction Group, LLC												
	2 Business name/disregarded entity name, if different from above												
ای		48											
age 3	3 Check appropriate box for federal tax classification of the person whose name following seven boxes.	classification of the person whose name is entered on line 1. Check only one of the 4 Exemptions (codes apply only to certain entitles, not individuals; see											
Print or type. Specific Instructions on page 3.	☐ Individual/sole proprietor or ☐ C Corporation ☑ S Corporation ☐ Partnership ☐ Trust/estate single-member ☐ ☐					Instructions on page 3);							
	_	S-S corporation D-Dortnarchi-\>					Exempt payee code (If any)						
	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check Exemption from FA									~ A .			
T ts	LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is						(if any		IFAI	JA I	вро	rung	
돌들	another LLC that is not disregarded from the owner for U.S. federal tax pr is disregarded from the owner should check the appropriate box for the tax						(11 441)	"	-				
ig.	☐ Other (see instructions) ▶				(A)	oplies (lo acco	unts r	naintain	ed ou	ıts/de	the U,S	L)
Š	5 Address (number, street, and apt. or suite no.) See Instructions.	Rec	quester's	name	and	add	ress	(opti	onal)				
I	3168 Hwy 17 S, Ste B		88						(7)				
9	6 City, state, and ZIP code												
- 1	Fleming Island FL 32003												
- 1	7 List account number(s) here (optional)												
	500 0												
Part	Taxpayer Identification Number (TIN)	*											
Enter y	our TIN in the appropriate box. The TIN provided must match the nam	ne given on line 1 to avoid		cial se	curi	ty nu	umbe	er					
	withholding. For Individuals, this is generally your social security num					\neg			П	\neg			
	it allen, sole proprietor, or disregarded entity, see the instructions for I , it is your employer Identification number (EIN). If you do not have a r					-			-	-	- 1		
TIN, la		idilibar, coorion to get a	or					- 24	-		_	_	
	f the account is in more than one name, see the instructions for line 1.	. Also see What Name and	En	прюуе	r ide	ntifi	catio	n ni	ımbe	r			
Numbe	er To Give the Requester for guidelines on whose number to enter.		Г										
			2	0	-[2	3	2	5	5	6	4	
Part	II Certification	***											_
Under	penalties of perjury, I certify that:										-		
	number shown on this form is my correct taxpayer identification numb												
	not subject to backup withholding because: (a) I am exempt from backup												
	ice (IRS) that I am subject to backup withholding as a result of a fallur inger subject to backup withholding; and	e to report all interest or di	vidends	, or (c	;) the	e IRS	S ha	S nc	otlfied	i m	e th	atla	im)
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 exemp	ot from FATCA reporting is	correct										
you hav	ation instructions. You must cross out item 2 above if you have been no re falled to report all interest and dividends on your tax return. For real est tion or abandonment of secured property, cancellation of debt, contribution an interest and dividends, you are not required to sign the certification, b	tate transactions, item 2 doe ons to an Individual retireme	es not ap nt arran	oply. F geme	or n nt (If	nortg RA), :	gage and	Inte gene	rest p erally,	oaic , pa	ł, I y me	ents	use
Sign Here	Signature of U.S. person ► Jan Bown	Date	>	2	12	3/	12	 3					
				.b	- 41		-		-1.				
General Instructions		 Form 1099-DIV (dividends, including those from stocks or mutual funds) 											
noted.	references are to the Internal Revenue Code unless otherwise	 Form 1099-MISC (various types of income, prizes, awards, or gross proceeds) 											
Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9. Purpose of Form		 Form 1099-B (stock or mutual fund sales and certain other transactions by brokers) 											
		Form 1099-S (proceeds from real estate transactions)											
• • • • • • • • • • • • • • • • • • • •		Form 1099-K (merchant card and third party network transactions)											
An Individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (TIN), adoption		 Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition) 											
		Form 1099-C (canceled debt)											
taxpay	er Identification number (ATIN), or employer identification number	• Form 1099-A (acquisition							•	•	,,		
(EIN), to	o report on an information return the amount paid to you, or other reportable on an information return. Examples of information	Use Form W-9 only if y alien), to provide your co			, pe	rsor	ı (inc	clud	ing a	res	idei	nt	
returns	include, but are not limited to, the following.	If you do not return Form W-9 to the requester with a TIN, you might											
• Form	1099-INT (interest earned or paid)	be subject to backup wit later.	hholdin	g. Se	e Wi	nat i	s ba	cku	p wit	hhc	oldin	g,	