

TOWN OF HOWEY-IN-THE-HILLS  
SARA MAUDE MASON PRESERVE BOARDWALK  
RFP:#2024-001

Title Page

Vender, Dock Pro LLC

Primary Address / Office, 793 Chestnut St Clermont FL 34711

Gary Butler Jr. Cell# 352 242 6415 Email: [Dockpr025@yahoo.com](mailto:Dockpr025@yahoo.com)

Managers Address / Office, 165 E Beach St Groveland FL 34736

Primary Contact

Gary Butler sr. Cell# 352 267 0009 Email: [Dockpr01466@yahoo.com](mailto:Dockpr01466@yahoo.com)

TOWN OF HOWEY-IN-THE-HILLS  
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RFP:#2024-001

Letter Of Transmittal:

Dock Pro LLC is a Sole Proprietorship located in Lake County Florida.

Primary Office,

Owner Gary Butler Jr.

793 Chestnut st Clermont FL 34711 cell#

352 242 6415

Email: [Dockpr025@yahQ0.com](mailto:Dockpr025@yahQ0.com)

Secondary office

Manager Gary Butler Sr.

165 E Beach st Groveland FL 34736

Cell# 352 267 0009

Email: [Dockprol466@yahoo.com](mailto:Dockprol466@yahoo.com)

Gary Butler Sr. is Authorized and will be representing Dock Pro LLC.

Dock Pro Gary Butler Sr. Certifies Dock Pro will furnish all goods and services specified in the proposal package at the prices quoted in the proposal and the proposal will remain firm for 60 days after the date that the proposal package is submi in order for the town to evaluate the proposal and make award.

Gary Butler Jr. and Sr. have made site visits and understand the scope of the project and look forward to working with The City of Howey — In — The — Hills on this project. Thank You for the opportunity to be your builder.  
Gary Butler Sr. Gary Butler Jr. Dock Pro LLC.

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Eligibility:

1. Provide proof of legal entity and authorization to do business within the State of Florida.

(See attached) 2 pages Sunbiz Division of corporations.

2. Provide a minimum of three specific references with appropriate contact information for "similar" projects, period of performance for the specific engagement, and the value of services performed.

Fox Run HOA Dock, Tavares **5'x3,000'**\$160,000.00

Fox Run HOA 352 343 0716

Cheryl Kilgore

Universal City Walk, Orlando 5- Hotel Docks and main City Walk dock Total  
\$250,000.00 +

City Walk David Malizia

321 443 0276

Hawthorne Mobile Home Park, Leesburg Redeck dock change floats add 300 cleats add  
250 Bumpers \$430,000.00

Chad Peck

352 360 6200

3. Indicate financial wherewithal and stability of firm.

Dock Pro LLC has been with Chase Bank for 15 yrs. and is financially strong. Recently purchased land on Lake Susan paid \$400,000.00 Cash and still holds over \$400,000.00 in account. Dock Pro LLC does not use credit lines (See attached)

4. Indicate any potential conflicts of interest with the Town.

Dock Pro LLC and employees do not have any conflicts of interest.

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Schedule and Price, for completing the project as outlined herein.

Dock Pro LLC will remove all existing materials and properly dispose of all materials.  
Dock Pro LLC will provide all materials, labor and equipment required to build a new boardwalk. 5' wide x 1,300' with seating areas that may be covered by galvalume Platform and observation tower.

**MATERIALS:**

All lumber will be #1 -Marine pressure treated, C-A. With organic fungicide, sealed with Olympic/ThomsonNOC wood protection or same. (Prior to installing)  
6x6 Piles, 2x10 joist, 2x10 girders, 2x6 kick plate, 2x6 mid rail 2x8 top rail.  
Decking will be 2x6 (1.5"x5.5") Composite attached with manufacturers recommended screws or better.

**A.D.A**

Boardwalk to be built level if slope is needed it will be 1" on 12" up or down.  
Kick plate will be to code. Handrail 36" on boardwalk / platform and 42" on observation tower.  
The top rail will be beveled 45\* at all splices. If wood it will be routed on all 4 sides  
Graspable railing all areas ramping or stairs.

**Using:**

6x6 wood Piles, 2x10 wood joist, 2x10 wood girders, 2x6 wood kick plate, 2x6 wood mid rail 2x8 wood top rail routed and splices at 45\* angle.  
Decking will be 2x6 (1.5"x5.5") Composite attached with manufacturers recommended screws or better.

For a total cost of \$379,500.00

Add \$21,667.00 for Option #1 Composite for top rail (Top rail will be wood framed composite top)

Add \$70,000.00 for Option #2 Aluminum piles, framing and girders.

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Add \$3,200.00 for each area to be covered with Galvalume roofing,

License / Permits / Laws

Dock Pro LLC is a Marine Contractor and is familiar with the conditions and requirements.

Dock Pro LLC carries Longshoreman Workers Comp, General Liability Insurance and Commercial Auto Insurance to pull required permits.

Dock Pro LLC has full experience to run all equipment required to do the job (We do not use sub- contractors)

Dock Pro LLC will provide electronic copies of all plans and engineering reports to the Town of Howey-in-the-Hills at the end of the project.

Project Timeline: Dock Pro LLC has estimated the project will be completed 180 days after the contract signing.



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## Detail by FEI/EIN Number

Florida Limited Liability Company

DOCK PRO LLC

E,LingJnfr.matiQn

Document Number L10000072072

FEVEIN Number 27-3007933

Date Filed 07/08/2010

State FL

Status ACTIVE Last Event LC STMNT OF  
RAJRO CHG

Event Date Filed 11/23/2016

Event Effective Date NONE

ecj.ncipalAdxess

793 chestnut st  
Clermont, FL 34711

Changed: 01/23/2023

Maili.ngug.rgsq

793 chestnut st  
Clermont, FL 34711

Changed: 01/23/2023

### **Registered Agent Name & Address**

Dock Pro LLC  
793 chestnut st  
Clermont FL 34711

Name Changed: 04/01/2019

Address Changed: 0112312023

### **Authorized Person(s) Detail**

Name & Address

Title President

BUTLER, GARY Theodore , Jr.  
793 Chestnut St  
CLERMONT, FL 34711

Title Manager

Butler, Gary Theodore , Sr.  
793 chestnut st  
Clermont, FL 34711

Annual-Bepgcts

Report Year	Filed Date
2022	03/11/2022
2023	01/23/2023
2024	01/22/2024

Document-Lægeg




<a href="#">01/22/2024 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
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<a href="#">02/10/2011 - ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">07/08/2010 _Florida Limited Liability.</a>	<a href="#">View image in PDF format</a>
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## ▼ Bank accounts

Bank accounts

Total available balance \$402,087.75



Account	Available balance e	Present balance	Account type
Dock Pro  >	\$226,012.09	\$226,012.09	Checking
			
CHASE BUS TOTAL	\$183.36	\$18336	Saving
			
<u>PREMIER PLUS</u>	\$115,689.71	\$115,689.71	Checking
CHASE SAVINGSÄ	\$60,202.59	\$60,202.59	Saving

ACORD@

CERTIFICATE OF LIABILITY INSURANCE

DATE (MWDDIWW)  
02/11/2024

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 condltlons of the policy, certain policies may require an endorsement A statement on this certificate does not confer ri hts to the certificate holder in lieu of such endorsement s).

PRODUCER  Agriculture insurance Solutions, LLC PO Box 560586  Montverde  FL 34756	NAME: Teresita Revell	
	PHONE	FAX
	407429-0133	NC No:
	E-MAIL agineurancesolutions@gmait.com	
	INSURER S AFFORDING COVERAGE	
INSURED  DOCK PRO LLC 793 CHESTNUT ST Clermont, FL 34711	INSURER A: Centu Surety Company	
	INSURER B : AmGUARD Insurance Company	
	INSURER C	
	INSURER D :	
	INSURER E :	
INSURER F •		
		NAIC #
		36951
		42390

COVERAGES

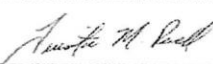
CERTIFICATE NUMBER:

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 checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:	X	CCP1182774	12/09/2023	12/09/2024	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 \$ 1,000,000 \$
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY		DOAU419499	09/26/2023	09/26/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 CSL BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ PIP Per Person/ Per Ac \$ 10,000
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
	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 <input type="checkbox"/>	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 \$

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**  
 Insured Vehicles- (1) 2007 TOYOTA TACOMA VIN: 3TMJU62N77M049319 (2) 2007 Ford F150 VIN: 1FTRF12WX7KC00329  
 Location Address- 793 CHESTNUT ST Clermont, FL 34711  
 Operations- Dock, deck, gazebo & water retaining wall construction over lakes. Carpentry work.  
 The Additional Insured endorsement is included with the General liability Insurance listed on this Certificate and is applied automatically when a written and signed agreement exists.

<b>CERTIFICATE HOLDER</b>  Town of Howie - In - The -Hills 101 N. Palm Avenue Howey-in-the-Hills, FL 34737	<b>CANCELLATION</b>  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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ACORD 25 (2016103)

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<b>CERTIFICATE OF LIABILITY INSURANCE</b>		Date 211212024
Producer: Plymouth Insurance Agency 2739 U.S. Highway 19 N. Holiday, FL 34691 (727) 938-5562	This Certificate is issued as a matter of information only and confers no rights upon the Certificate Holder. This Certificate does not amend, or alter the coverage afforded by the policy below.	
	Insurers Affording Coverage	NAIC #
Insured: South East Personnel Leasing, Inc. & Subsidiaries 2739 U.S. Highway 19 N. Holiday, FL 34691	Insurer A: Lion Insurance Company	11075
	Insurer B:	
	Insurer C:	
	Insurer D:	
	Insurer E:	

Coverages						
The policies insurance listed below have been issued to insure the Contractor indicating any requirement, term or condition on any contractor 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 terms, exclusions, and conditions of such policies. Aggregate limits shown may have been reduced by paid claims.						
INSR I-TR	ADDL INSRD	Type of Insurance	Policy Number	Policy Date (MWDD,'YY)	Policy Expiration Date(MWDDNY)	Limits
		<b>GENERAL LIABILITY</b> <input type="checkbox"/> Commercial General Liability <input type="checkbox"/> Claims Made  General aggregate limit applies per: <input type="checkbox"/> Policy <input checked="" type="checkbox"/> Project <input checked="" type="checkbox"/> LOC				Each Occurrence Damage to rented premises (EA occurrence) Med Exp Personal Adv Injury General Aggregate Products - ComplOp Agg
		<b>UTOMOBILE LIABILITY</b> Any Auto <input type="checkbox"/> All Owned Autos <input type="checkbox"/> Scheduled Autos <input type="checkbox"/> Hired Autos <input type="checkbox"/> Non-Owned Autos				Combined Single Limit (4 Accident) Bodily Injury (Per Person) Bodily Injury (Per Accident) Property Damage (Per Accident)
		<b>EXCESSIUMBRELLA LIABILITY</b> <input type="checkbox"/> Claims Made Deductible				Each Occurrence Aggregate
A		<b>Workers Compensation and Liability</b> Any partner/executive member excluded? If Yes, describe NO under special provisions below.	wc 71949	01/01/2024	01/01/2025	<input checked="" type="checkbox"/> WC Statut Limits <input type="checkbox"/> OTH- E.L. Each Accident <b>\$1,000,000</b> E.L. Disease - Employee <b>\$1,000,000</b> E.L. Disease - Policy Limits <b>\$1,000,000</b>
			Lion Insurance Company is a MO Best Company rated A Excellent AMB # 12616			
Descriptions of Operations/Locations/Vehicles/Exclusions added by Endorsement/Special Provisions: Client ID: 92-71-368 Coverage only applies to active employee(s) of South East Personnel Leasing, Inc. & Subsidiaries that are leased to the following "Client Company": <p style="text-align: center;"><b>Dock Pro LLC</b></p> Coverage only applies to injuries incurred by South East Personnel Leasing, Inc. & Subsidiaries of the employee(s) while working in FL. Coverage does not apply to temporary 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 <a href="mailto:operations@lioninsurancecompany.com">operations@lioninsurancecompany.com</a> Project Name: ISSUE 02-12-24 (TD)						
						Issue Date: 10/4/2023
UOLDEQ						

<p>TOWN OF HOWEY-IN-THE-HILLS</p> <p>101 N PALM AVENUE HOWEY-IN-THE-HILLS, FL 34737</p>	<p>CANCELLATION</p> <p>Should any of the above described DE can before expiration date thereof, the insurer will endeavor to give 30 days written notice to the certificate holder named to the let. but failure to do so shall impose obligation or liability of any kind upon the insurer, agents or representatives.</p> 
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Composite, kick plate, mid rail top rail.  
Aluminum piles / framing