



**Levy County Board of County Commissioners  
Procurement Department  
310 School Street  
P.O. Box 310  
Bronson, FL 32621  
Phone: 352-486-5218, Ext. 2**

August 29, 2022

RE: FY 23 Yearly Bids Memo

ITB\_2023\_001 Portable Toilets – Jones Plumbing

ITB\_2023\_002 Asphalt – The County received 1 bid (Preferred Materials), the department is requesting that for fiscal year 2023 that they be allowed to obtain quotes by the job instead of locking the County into higher pricing throughout the fiscal year.

ITB\_2023\_003 Sign Materials – The County received 1 bid (Method3 LLC), the department is requesting that the Procurement Department re-bid this to obtain more bids.

ITB\_2023\_004 Coldmix – The County received no bids, the department is requesting that for fiscal year 2023 that they be allowed to obtain quotes by the job instead of rebidding and locking the County into higher pricing throughout the fiscal year.

ITB\_2023\_005 Safety Materials – The County received 4 bids (Heaven's Ark Enterprise LLC, Safety Zone Specialists, USA Proteck, and Warrior Supply Depot). The lowest responsive responsible bid was received from Safety Zone Specialists.

ITB\_2023\_006 Culvert Pipe – The County received no bids, the department is requesting that for fiscal year 2023 that they be allowed to obtain quotes by the job instead of rebidding and locking the County into higher pricing throughout the fiscal year.

ITB\_2023\_007 Paint Striping and Marking Services – The County received 1 bid (Emerald Coast Striping), the department is requesting that for fiscal year 2023 that they be allowed to obtain quotes by the job instead of locking the County into higher pricing throughout the fiscal year.

LEVY COUNTY BOARD OF COUNTY COMMISSIONERS  
 BID ATTENDANCE SHEET

DATE: 8/22/2022

TIME: 2:00 P.M.

BID IDENTIFIER: ITB\_2023\_001 – ITB\_2023\_007

STAFF IN ATTENDANCE:

PRINT NAME	SIGNATURE	DEPARTMENT
Sharon Knowles	<i>Sharon Knowles</i>	Road
W.R.D.	<i>W.R.D.</i>	Board
Alicia Tubeway	<i>Alicia Tubeway</i>	Procurement.

BIDDERS IN ATTENDANCE:

PRINT NAME	SIGNATURE	COMPANY

PUBLIC IN ATTENDANCE:

PRINT NAME	SIGNATURE

## eBid Response

Add Response

### Supplier

Date

**Jones Plumbing & Septic Tank Service Inc.**

Responded Date : 08/17/2022

### Supplier Details

Edit eBid Response

View History

Supplier Name	Jones Plumbing & Septic Tank Service Inc.
Address	1490 NE 130th Street , Trenton, Florida 32693
Phone Number	352-493-2098
Bid Response Date	08/17/2022 7:54 AM Eastern
Bid Amount	0
Response Status	Complete
Notes	I have entered all the required documents but keep getting a message I need one more document.

### Required Documents

✓ [Bid Document](#)(Electronic/Online)

Download Entire Bid Package

### Supplemental Documents

- ✓ [Bid Documents](#) (Electronic/Online)
- ✓ [Cover sheet](#)(Electronic/Online)
- ✓ [Attachment 1 Bid Pricing](#)(Electronic/Online)
- ✓ [Statement on Public Entity Crime](#)(Electronic/Online)
- ✓ [Non Collusion Affidavit](#)(Electronic/Online)
- ✓ [Bid Signature Form](#)(Electronic/Online)
- ✓ [Drug Free Workplace](#)(Electronic/Online)
- ✓ [Conflict of Interest Statement](#)(Electronic/Online)
- ✓ [Vendor Information Form](#)(Electronic/Online)

- ✓ [Vendor Information Form](#)(Electronic/Online)
- ✓ [W-9 Form](#)(Electronic/Online)
- ✓ [Certificate of Insurance](#)(Electronic/Online)
- ✓ [Business License Tommy Jones](#)(Electronic/Online)
- ✓ [Evidence of Qualification to Transact Business](#)(Electronic/Online)

BID CHECKLIST  
ITB\_2023\_001  
PORTABLE TOILETS

BIDDER NAME: JONES PLUMBING & SEPTIC TANK SERVICE, INC.

- |  |   |
|--|---|
| 1. COVER PAGE                                      | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 2. ATTACHMENT 1 BID PRICING FORM                   | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 3. SWORN STATEMENT ON PUBLIC ENTITY CRIME FORM     | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 4. NON-COLLUSION AFFIDAVIT FORM                    | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 5. BID SIGNATURE FORM                              | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 6. DRUG-FREE WORK PLACE FORM                       | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 7. CONFLICT OF INTEREST DISCLOSURE STATEMENT FORM  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 8. VENDOR INFORMATION FORM                         | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 9. W9  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 10. CERTIFICATE OF INSURABILITY                    | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 11. EVIDENCE QUALIFIED TO TRANSACT BUSINESS        | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 12. COPIES OF AND APPLICABLE/CURRENT LICENSE/CERTS | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |

BID PRICE: \$85.00 PER MONTH/\$1020 PER YEAR

COMPLETION TIME: N/A

DATE REVIEWED: 8/22/2022

REVIEWER NAME: ALI TRETHERWAY

SIGNATURE: *Ali Tretheway*

# Tabulation Sheet

**Agency Name** Levy County Board of County Commissioners

**Bid Number** ITB-ITB\_2023\_001-0-2023/AT

**Bid Name** PORTABLE TOILETS

**Bid Due Date** 08/22/2022 14:00:00 Eastern

**Bid Opening** **Closed**

1 responses found.

✓ online, 
 ✗ offline, 
 ⏸ not submitting, 
 ⚠ not received

Company	Responded	Address	Bid Amount	Alt Bid Amount	Declared Attributes	Documents	Sent
<b>Complete</b>							
1 . Jones Plumbing & Septic Tank Service Inc.	08/17/2022 07:54:05 Eastern	1490 NE 130th Street, Trenton, FL, 32693	\$0.0000	0.0000		Bid Document	✓

## eBid Response

Add Response

### Supplier

Date  

**Preferred Materials, Inc.**

Responded Date : 08/22/2022

### Supplier Details

Edit eBid Response

View History

Supplier Name	Preferred Materials, Inc.
Address	11482 Columbia Park Dr W ste 3, Jacksonville, Florida 32258
Phone Number	904-288-6300
Bid Response Date	08/22/2022 11:33 AM Eastern
Bid Amount	0
Response Status	Complete

### Required Documents

✓ [Bid Document](#)(Electronic/Online)

Download Entire Bid Package

BID CHECKLIST

ITB\_2023\_002

ASPHALT

BIDDER NAME: PREFERRED MATERIALS, INC.

- |  |   |
|--|---|
| 1. COVER PAGE                                      | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 2. ATTACHMENT 1 BID PRICING FORM                   | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 3. SWORN STATEMENT ON PUBLIC ENTITY CRIME FORM     | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 4. NON-COLLUSION AFFIDAVIT FORM                    | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 5. BID SIGNATURE FORM                              | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 6. DRUG-FREE WORK PLACE FORM                       | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 7. CONFLICT OF INTEREST DISCLOSURE STATEMENT FORM  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 8. VENDOR INFORMATION FORM                         | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 9. W9  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 10. CERTIFICATE OF INSURABILITY                    | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 11. EVIDENCE QUALIFIED TO TRANSACT BUSINESS        | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 12. COPIES OF AND APPLICABLE/CURRENT LICENSE/CERTS | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |

BID PRICE:

ITEM 1: \$105

ITEM 2: \$115

COMPLETION TIME: N/A

DATE REVIEWED: 8/22/2022

REVIEWER NAME: ALI TRETHERWAY

SIGNATURE: *Ali Trettheway*



# Tabulation Sheet

**Agency Name** Levy County Board of County Commissioners





**Bid Number** ITB-ITB\_2023\_002-0-2023/AT


**Bid Name** ASPHALT

**Bid Due Date** 08/22/2022 14:00:00 Eastern

**Bid Opening** **Closed**

1 responses found.

 online, 
  offline, 
  not submitting, 
  not received

Complete							
Company	Responded	Address	Bid Amount	Alt Bid Amount	Declared Attributes	Documents	Sent
1 . Preferred Materials, Inc.	08/22/2022 11:33:28 Eastern	11482 Columbia Park Dr W, ste 3, Jacksonville, FL, 32258	\$0.0000	0.0000		Bid Document	

## eBid Response

Add Response

### Supplier

Date  1

Method 3 llc

Responded Date : 08/22/2022

### Supplier Details

Edit eBid Response

View History

Supplier Name	Method 3 llc
Address	12355 62nd st N Unit G, Largo, Florida 33773
Phone Number	727-455-0577
Self Declarations	Small Business
Bid Response Date	08/22/2022 1:46 PM Eastern
Bid Amount	0
Response Status	Complete

### Required Documents

✓ [Bid Document](#)(Electronic/Online)

Download Entire Bid Package

BID CHECKLIST

ITB\_2023\_003

SIGN MATERIALS

BIDDER NAME: METHOD3 LLC.

- |  |   |
|--|---|
| 1. COVER PAGE                                      | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 2. ATTACHMENT 1 BID PRICING FORM                   | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 3. SWORN STATEMENT ON PUBLIC ENTITY CRIME FORM     | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 4. NON-COLLUSION AFFIDAVIT FORM                    | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 5. BID SIGNATURE FORM                              | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 6. DRUG-FREE WORK PLACE FORM                       | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 7. CONFLICT OF INTEREST DISCLOSURE STATEMENT FORM  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 8. VENDOR INFORMATION FORM                         | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 9. W9  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 10. CERTIFICATE OF INSURABILITY                    | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 11. EVIDENCE QUALIFIED TO TRANSACT BUSINESS        | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 12. COPIES OF AND APPLICABLE/CURRENT LICENSE/CERTS | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |

BID PRICE: SEE SPREADSHEET

COMPLETION TIME: N/A

DATE REVIEWED: 8/22/2022

REVIEWER NAME: ALI TRETHERWAY

SIGNATURE: *Ali Tretheway*

# Tabulation Sheet

**Agency Name** Levy County Board of County Commissioners




**Bid Number** ITB-ITB\_2023\_003-0-2023/AT

**Bid Name** SIGN MATERIALS

**Bid Due Date** 08/22/2022 14:00:00 Eastern

**Bid Opening** **Closed**

1 responses found.

✓ online,  offline,  not submitting,  not received

Company	Responded	Address	Bid Amount	Alt Bid Amount	Declared Attributes	Documents	Sent
<b>Complete</b>							
1 . Method 3 llc	08/22/2022 13:46:01 Eastern	12355 62nd st N, Unit G, Largo, FL, 33773	\$0.0000	0.0000	Small Business	Bid Document	✓

**ATTACHMENT 1 BID PRICING FORM**

The undersigned, as bidder, does hereby declare that he/she has read the Invitation to bid, Scope of Work, Intent and General Information, General Conditions, Bid Form and Required and Optional Forms, any addenda that may have been issued, and any other documentation for ITB\_2023\_003, Sign Materials. All bid prices shall be FOB, Levy County Road Department at 660 N. Hathaway Ave, Bronson, FL 32621.

Each Bidder shall state the Unit Price for each item.

**1. FACES**

COMMODITY	UNIT PRICE
20-00002	\$ 27.00
20-00003	\$ 27.00
20-00004	\$ 45.00
20-00005	\$ 45.00
20-00006	\$ 72.00
20-00007	\$ 72.00
20-00008	\$ 36.00
20-00009	\$ 56.00
20-00010	\$ 56.00
20-00011	\$ 56.00
20-00012	\$ 20.00
20-00013	\$ 15.00
20-00014	\$ 56.00
20-00015	\$ 56.00
20-00016	\$ 56.00
20-00017	\$ 56.00
20-00018	\$ 56.00
20-00019	\$ 56.00
20-00020	\$ 56.00
20-00021	\$ 45.00
20-00022	\$ 56.00
20-00023	\$ 56.00
20-00024	\$ 56.00
20-00025	\$ 56.00
20-00026	\$ 56.00
20-00027	\$ 56.00
20-00028	\$ 56.00
20-00029	\$ 56.00
20-00030	\$ 56.00
20-00031	\$ 56.00
20-00032	\$ 80.00
20-00033	\$ 36.00
20-00068	\$ 15.00
20-00069	\$ 56.00
20-00071	\$ 140.00
20-00094	\$ 56.00
20-00095	\$ 56.00
20-00097	\$ 56.00
20-00099	\$ 56.00
20-00100	\$ 56.00
20-00101	\$ 80.00
20-00102	\$ 56.00
20-00103	\$ 80.00
20-00109	\$ 56.00
20-00110	\$ 56.00

**2. BLANKS**

COMMODITY	UNIT PRICE
20-00049	\$ 60.00
20-00050	\$ 50.00
20-00051	\$ 90.00
20-00052	\$ 30.00
20-00053	\$ 22.00
20-00054	\$ 60.00
20-00055	\$ 62.00
20-00056	\$ 80.00
20-00057	\$ 28.00
20-00058	\$ 90.00
20-00059	\$ 22.00
20-00060	\$ 40.00
20-00061	\$ 62.00
20-00062	\$ 90.00
20-00063	\$ 62.00
20-00064	\$ 62.00
20-00065	\$ 62.00
20-00066	\$ 12.00
20-00067	\$ 16.00
20-00106	\$ 40.00
20-00107	\$ 16.00
20-00108	\$ 13.00
20-00126	\$ 15.00
20-00132	\$ 128.00
20-00138	\$ 128.00
20-00139	\$ 90.00
20-00143	\$ 62.00
20-00148	\$ 6.00
20-00156	\$ 30.00
20-00157	\$ 96.00
20-00160	\$ 30.00
20-00162	\$ 75.00

**3. BORDER - MATERIAL**

COMMODITY	UNIT PRICE
20-00001	\$ 39.00
20-00046	\$ 1,400.00
20-00047	\$ 1,400.00
20-00048	\$ 1,400.00
20-00070	\$ 39.00
20-00074	\$ 1,400.00
20-00075	\$ 273.00
20-00076	\$ 273.00
20-00077	\$ 351.00
20-00078	\$ 1,170.00
20-00079	\$ 1,400.00
20-00080	\$ 935.00
20-00081	\$ 935.00
20-00082	\$ 935.00
20-00083	\$ 935.00
20-00084	\$ 935.00
20-00085	\$ 1,170.00
20-00086	\$ 1,170.00
20-00087	\$ 234.00
20-00088	\$ 39.00
20-00089	\$ 32.00
20-00090	\$ 960.00
20-00091	\$ 1,170.00
20-00092	\$ 1,170.00
20-00093	\$ 1,400.00
20-00096	\$ 1,150.00
20-00098	\$ 768.00
20-00104	\$ 768.00
20-00105	\$ 234.00
20-00116	\$ 39.00
20-00117	\$ 39.00
20-00118	\$ 960.00
20-00120	\$ 960.00
20-00128	\$ 935.00
20-00129	\$ 1,170.00
20-00135	\$ 1,875.00
20-00136	\$ 1,875.00
20-00145	\$ 960.00
20-00146	\$ 435.00
20-00147	\$ 1,170.00
20-00149	\$ 1,100.00
20-00150	\$ 1,100.00
20-00151	\$ 960.00
20-00152	\$ 192.00
20-00153	\$ 165.00

**4. POSTS, FIB DEL & ETC**

COMMODITY	UNIT PRICE
20-00072	\$ 8.50
20-00073	\$ 60.00
20-00115	\$ 64.00
20-00163	\$ 32.00
20-00130	\$ 38.00
20-00131	\$ 76.00
20-10006	\$ 68.00
20-00161	\$ 8.50
N/A - 1	\$ 162.00
N/A - 2	\$ 8.00
N/A - 3	\$ 136.00
N/A - 4	\$ 158.00
N/A - 5	\$ 32.00

<b>1. TOTAL</b>	<b>\$ 3,976.00</b>
<b>2. TOTAL</b>	<b>\$ 1,729.00</b>
<b>3. TOTAL</b>	<b>\$ 50,800.00</b>
<b>4. TOTAL</b>	<b>\$ 851.00</b>

<b>TOTAL BID:</b>	<b>\$ 57,356.00</b>
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20-00111	\$ 20.00
20-00112	\$ 20.00
20-00113	\$ 20.00
20-00114	\$ 20.00
20-00133	\$ 27.00
20-00134	\$ 80.00
20-00137	\$ 27.00
20-00140	\$ 80.00
20-00141	\$ 56.00
20-00142	\$ 80.00
20-00165	\$ 27.00
N/A - 1	\$ 80.00
N/A - 2	\$ 176.00
N/A - 3	\$ 56.00
N/A - 4	\$ 56.00
N/A - 5	\$ 56.00
N/A - 6	\$ 56.00
N/A - 7	\$ 56.00
N/A - 8	\$ 56.00
N/A - 9	\$ 36.00
N/A - 10	\$ 120.00
N/A - 11	\$ 56.00
N/A - 12	\$ 56.00
N/A - 13	\$ 56.00
N/A - 14	\$ 72.00
N/A - 15	\$ 72.00

20-00154	\$ 55.00
20-00155	\$ 110.00
20-00158	\$ 1,875.00
20-00159	\$ 1,875.00
20-00164	\$ 935.00
20-10001	\$ 1,400.00
20-10002	\$ 1,400.00
20-10003	\$ 1,150.00
20-10004	\$ 1,150.00
20-10005	\$ 1,150.00
N/A - 1	\$ 1,150.00
N/A - 2	\$ 265.00
N/A - 3	\$ 265.00

---

**eBid Response**

**Add Response**

Ⓢ No eBid Response Available

Coldmix - ITB-2023-004

## eBid Response

Add Response

### Supplier

Date

**Safety Zone Holdings, Inc. dba Safety Zone Specialists**

Responded Date : 08/22/2022

**Heaven's Ark Enterprise, LLC**

Responded Date : 08/22/2022

**Warrior Supply Depot**

Responded Date : 08/17/2022

**USA Protek**

Responded Date : 08/09/2022

### Supplier Details

Edit eBid Response

View History

Supplier Name	Safety Zone Holdings, Inc. dba Safety Zone Specialists
Address	PO Box 90764 , Lakeland, Florida 33804-0764
Phone Number	863-816-3402
Bid Response Date	08/22/2022 10:36 AM Eastern
Bid Amount	0
Response Status	Complete

### Required Documents

✓ [Bid Document](#)(Electronic/Online)

Download Entire Bid Package

### Supplemental Documents

✓ [Line Items Literature](#)(Electronic/Online)



## eBid Response

Add Response

### Supplier

Date

**Safety Zone Holdings, Inc. dba Safety Zone Specialists**

Responded Date : 08/22/2022

**Heaven's Ark Enterprise, LLC**

Responded Date : 08/22/2022

**Warrior Supply Depot**

Responded Date : 08/17/2022

**USA Protek**

Responded Date : 08/09/2022

### Supplier Details

Edit eBid Response

View History

Supplier Name	Heaven's Ark Enterprise, LLC
Address	30042 Mission Blvd. #121-323, Hayward, California 94544
Phone Number	415-941-3005
Bid Response Date	08/22/2022 7:46 AM Eastern
Bid Amount	0
Response Status	Complete

### Required Documents

✓ [Bid Document](#)(Electronic/Online)

Download Entire Bid Package

### Supplemental Documents

✓ [Notary Page](#)(Electronic/Online)

## eBid Response

Add Response

### Supplier

Date

**Safety Zone Holdings, Inc. dba Safety Zone Specialists**

Responded Date : 08/22/2022

**Heaven's Ark Enterprise, LLC**

Responded Date : 08/22/2022

**Warrior Supply Depot**

Responded Date : 08/17/2022

**USA Protek**

Responded Date : 08/09/2022

### Supplier Details

Edit eBid Response

View History

Supplier Name	Warrior Supply Depot
Address	9838 Old Baymeadows Road Suite 169, Jacksonville, Florida 32256
Phone Number	904-422-4326
Self Declarations	Small Business, Veteran Owned
Bid Response Date	08/17/2022 6:32 PM Eastern
Bid Amount	0
Response Status	Complete

### Required Documents

✓ [Bid Document](#)(Electronic/Online)

Download Entire Bid Package

## eBid Response

Add Response

### Supplier

Date

#### Safety Zone Holdings, Inc. dba Safety Zone Specialists

Responded Date : 08/22/2022

#### Heaven's Ark Enterprise, LLC

Responded Date : 08/22/2022

#### Warrior Supply Depot

Responded Date : 08/17/2022

#### USA Protek

Responded Date : 08/09/2022

### Supplier Details

Edit eBid Response

View History

Supplier Name	USA Protek
Address	2404 Crews Lake Hills Loop No. , Lakeland, Florida 33813
Phone Number	863-944-1422
Self Declarations	Small Business, Woman Owned
Bid Response Date	08/09/2022 11:13 AM Eastern
Bid Amount	0
Response Status	Complete
Notes	Additional document needed, signed notary page

### Required Documents

✓ [Bid Document](#)(Electronic/Online)

Download Entire Bid Package

### Supplemental Documents

✓ [COI](#)(Electronic/Online)

✓ [WBE Certification with Hillsborough County](#)(Electronic/Online)

✓ [Resale tax certificate](#)(Electronic/Online)

BID CHECKLIST  
ITB\_2023\_005  
SAFETY MATERIALS

BIDDER NAME: SAFETY ZONE SPECIALISTS

- |  |   |
|--|---|
| 1. COVER PAGE                                      | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 2. ATTACHMENT 1 BID PRICING FORM                   | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 3. SWORN STATEMENT ON PUBLIC ENTITY CRIME FORM     | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 4. NON-COLLUSION AFFIDAVIT FORM                    | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 5. BID SIGNATURE FORM                              | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 6. DRUG-FREE WORK PLACE FORM                       | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 7. CONFLICT OF INTEREST DISCLOSURE STATEMENT FORM  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 8. VENDOR INFORMATION FORM                         | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 9. W9  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 10. CERTIFICATE OF INSURABILITY                    | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 11. EVIDENCE QUALIFIED TO TRANSACT BUSINESS        | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 12. COPIES OF AND APPLICABLE/CURRENT LICENSE/CERTS | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |

BID PRICE: SEE SPREADSHEET

COMPLETION TIME: N/A

DATE REVIEWED: 8/22/2022

REVIEWER NAME: ALI TRETHERWAY

SIGNATURE: *Ali Trettheway*

BID CHECKLIST  
ITB\_2023\_005  
SAFETY MATERIALS

BIDDER NAME: HEAVEN'S ARK ENTERPRISE, LLC

- |  |   |
|--|---|
| 1. COVER PAGE                                      | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| a. NOT CHECKED OFF                                 |   |
| 2. ATTACHMENT 1 BID PRICING FORM                   | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| a. DID NOT BID ALL ITEMS                           |   |
| 3. SWORN STATEMENT ON PUBLIC ENTITY CRIME FORM     | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 4. NON-COLLUSION AFFIDAVIT FORM                    | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| a. NOT FULLY FILLED OUT                            |   |
| 5. BID SIGNATURE FORM                              | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 6. DRUG-FREE WORK PLACE FORM                       | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 7. CONFLICT OF INTEREST DISCLOSURE STATEMENT FORM  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 8. VENDOR INFORMATION FORM                         | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 9. W9  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 10. CERTIFICATE OF INSURABILITY                    | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 11. EVIDENCE QUALIFIED TO TRANSACT BUSINESS        | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| 12. COPIES OF AND APPLICABLE/CURRENT LICENSE/CERTS | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |

BID PRICE: SEE SPREADSHEET

COMPLETION TIME: N/A

DATE REVIEWED: 8/22/2022

REVIEWER NAME: ALI TRETHERWAY

SIGNATURE: *Ali Trettheway*

BID CHECKLIST  
ITB\_2023\_005  
SAFETY MATERIALS

BIDDER NAME: USA PROTEK

- |  |   |
|--|---|
| 1. COVER PAGE                                  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 2. ATTACHMENT 1 BID PRICING FORM               | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 3. SWORN STATEMENT ON PUBLIC ENTITY CRIME FORM | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |

a. NO SIGNATURE ON FORM, MISSING (STATE OF/COUNTY OF ON NOTARY PG.)

- |                                 |   |
|---------------------------------|---|
| 4. NON-COLLUSION AFFIDAVIT FORM | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 5. BID SIGNATURE FORM           | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |

a. NO SIGNATURE ON FORM

- |  |   |
|--|---|
| 6. DRUG-FREE WORK PLACE FORM                       | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 7. CONFLICT OF INTEREST DISCLOSURE STATEMENT FORM  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 8. VENDOR INFORMATION FORM                         | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 9. W9  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 10. CERTIFICATE OF INSURABILITY                    | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 11. EVIDENCE QUALIFIED TO TRANSACT BUSINESS        | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 12. COPIES OF AND APPLICABLE/CURRENT LICENSE/CERTS | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |

BID PRICE: SEE SPREADSHEET

COMPLETION TIME: N/A

DATE REVIEWED: 8/22/2022

REVIEWER NAME: ALI TRETHERWAY

SIGNATURE: *Ali Trettheway*

BID CHECKLIST  
ITB\_2023\_005  
SAFETY MATERIALS

BIDDER NAME: WARRIOR SUPPLY DEPOT, INC.

1. COVER PAGE YES  NO

a. BOXES NOT CHECKED OFF

2. ATTACHMENT 1 BID PRICING FORM YES  NO

3. SWORN STATEMENT ON PUBLIC ENTITY CRIME FORM YES  NO

4. NON-COLLUSION AFFIDAVIT FORM YES  NO

5. BID SIGNATURE FORM YES  NO

a. NOT SIGNED

6. DRUG-FREE WORK PLACE FORM YES  NO

7. CONFLICT OF INTEREST DISCLOSURE STATEMENT FORM YES  NO

8. VENDOR INFORMATION FORM YES  NO

9. W9 YES  NO

10. CERTIFICATE OF INSURABILITY YES  NO

11. EVIDENCE QUALIFIED TO TRANSACT BUSINESS YES  NO

12. COPIES OF AND APPLICABLE/CURRENT LICENSE/CERTS YES  NO

BID PRICE: SEE SPREADSHEET

COMPLETION TIME: N/A

DATE REVIEWED: 8/22/2022

REVIEWER NAME: ALI TRETHERWAY

SIGNATURE: *Ali Tretheway*

# Tabulation Sheet

**Agency Name** Levy County Board of County Commissioners





**Bid Number** ITB-ITB\_2023\_005-0-2023/AT





**Bid Name** SAFETY MATERIALS

**Bid Due Date** 08/22/2022 14:00:00 Eastern

**Bid Opening** **Closed**

4 responses found.

 online, 
  offline, 
  not submitting, 
  not received

Company	Responded	Address	Bid Amount	Alt Bid Amount	Declared Attributes	Documents	Sent
<b>Complete</b>							
1 . Heaven's Ark Enterprise, LLC	08/22/2022 07:46:20 Eastern	30042 Mission Blvd., #121-323, Hayward, CA, 94544	\$0.0000	0.0000		Bid Document	
2 . Safety Zone Holdings, Inc. dba Safety Zone Specialists	08/22/2022 10:36:05 Eastern	PO Box 90764, Lakeland, FL, 33804-0764	\$0.0000	0.0000		Bid Document	
3 . USA Protek	08/09/2022 11:13:02 Eastern	2404 Crews Lake Hills Loop No., Lakeland, FL, 33813	\$0.0000	0.0000	Small Business, Woman Owned	Bid Document	
4 . Warrior Supply Depot	08/17/2022 18:32:53 Eastern	9838 Old Baymeadows Road, Suite 169, Jacksonville, FL, 32256	\$0.0000	0.0000	Small Business, Veteran Owned	Bid Document	



**ITB\_2023\_005 SAFETY MATERIALS**

**BID TABULATIONS**

<b>HEAVEN'S ARK ENTERPRISE LLC</b>					<b>SAFETY ZONE SPECIALISTS</b>				
<b>ITEM</b>	<b>BID PRICE</b>				<b>ITEM</b>	<b>BID PRICE</b>			
1	\$ -				1	\$ 41.95			
2	\$ -				2	\$ 22.50			
3	\$ -				3	\$ 18.50			
4	\$ 2.60				4	\$ 4.50			
5	\$ 2.60				5	\$ 4.50			
6	\$ -				6	\$ 79.95			
7	\$ -				7	\$ 21.50	FOR 36"	\$ 31.85	FOR 48"
8	\$ 13.99				8	\$ 21.45			
9	\$ 18.52				9	\$ 25.85			
10	\$ -				10	\$ 11.00			
11	\$ -				11	\$ 3.85			
12	\$ 3.05				12	\$ 5.95			
13	\$ 3.05				13	\$ 5.95			
14	\$ 7.22				14	\$ 10.75			
<b>TOTAL BID</b>	<b>\$ 51.03</b>				<b>TOTAL BID</b>	<b>\$ 278.20</b>			
<b>*DID NOT BID ALL ITEMS</b>					<b>*LOWEST BID RECEIVED</b>				
<b>USA PROTECK</b>					<b>WARRIOR SUPPLY DEPOT</b>				
<b>ITEM</b>	<b>BID PRICE</b>				<b>ITEM</b>	<b>BID PRICE</b>			
1	\$ 47.88				1	\$ 59.11			
2	\$ 23.75				2	\$ 28.83			
3	\$ 16.60				3	\$ 23.51			
4	\$ 4.00				4	\$ 3.15			
5	\$ 4.00				5	\$ 3.15			
6	\$ 94.00				6	\$ 108.42			
7	\$ 30.00				7	\$ 61.18			
8	\$ 16.65				8	\$ 22.98			
9	\$ 20.20				9	\$ 22.98			
10	\$ 5.25				10	\$ 8.18			
11	\$ 3.60				11	\$ 3.53			
12	\$ 6.60				12	\$ 3.30			
13	\$ 6.60				13	\$ 3.71			
14	\$ 6.60				14	\$ 8.10			
<b>TOTAL</b>	<b>\$ 285.73</b>				<b>TOTAL</b>	<b>\$ 360.13</b>			

---

## eBid Response

Add Response

ⓘ No eBid Response Available

Culvert Pipe ITB - 2023-004

## eBid Response

Add Response

### Supplier

Date

**Emerald Coast Striping**

Responded Date : 08/22/2022

### Supplier Details

Edit eBid Response

View History

Supplier Name	Emerald Coast Striping
Address	1901 N East Ave , Panama City, Florida 32405
Phone Number	850-545-5965
Bid Response Date	08/22/2022 10:06 AM Eastern
Bid Amount	0
Response Status	Complete

### Required Documents

✓ [Bid Document](#)(Electronic/Online)

Download Entire Bid Package

BID CHECKLIST

ITB\_2023\_007

PAINT STRIPING AND MARKING SERVICES

BIDDER NAME: EMERALD COAST STRIPING LLC

- |  |   |
|--|---|
| 1. COVER PAGE                                      | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 2. ATTACHMENT 1 BID PRICING FORM                   | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 3. SWORN STATEMENT ON PUBLIC ENTITY CRIME FORM     | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 4. NON-COLLUSION AFFIDAVIT FORM                    | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 5. BID SIGNATURE FORM                              | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| <b>a. NOT SIGNED</b>                               |   |
| 6. DRUG-FREE WORK PLACE FORM                       | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 7. CONFLICT OF INTEREST DISCLOSURE STATEMENT FORM  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 8. VENDOR INFORMATION FORM                         | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 9. W9  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 10. CERTIFICATE OF INSURABILITY                    | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| 11. EVIDENCE QUALIFIED TO TRANSACT BUSINESS        | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| 12. COPIES OF AND APPLICABLE/CURRENT LICENSE/CERTS | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |

BID PRICE: SEE BID DOCUMENT

COMPLETION TIME: N/A

DATE REVIEWED: 8/29/2022

REVIEWER NAME: ALI TRETHERWAY

SIGNATURE: *Ali Trettheway*

# Tabulation Sheet

**Agency Name** Levy County Board of County Commissioners





**Bid Number** ITB-ITB\_2023\_007-0-2023/AT

**Bid Name** PAINT STRIPING AND MARKING SERVICES

**Bid Due Date** 08/22/2022 14:00:00 Eastern

**Bid Opening** **Closed**

1 responses found.

 online, 
  offline, 
  not submitting, 
  not received

	Company	Responded	Address	Bid Amount	Alt Bid Amount	Declared Attributes	Documents	Sent
<b>Complete</b>								
1	Emerald Coast Striping	08/22/2022 10:06:33 Eastern	1901 N East Ave, Panama City, FL, 32405	\$0.0000	0.0000		Bid Document	



LEVY COUNTY BOARD OF COUNTY COMMISSIONERS  
 PROCUREMENT DEPARTMENT  
 P.O. BOX 310  
 BRONSON, FL 32621  
 PHONE: (352) 486-5218 EXT. 2  
 FAX: (352) 486-5167  
 EMAIL: [TRETHEWAY-ALI@LEVYCOUNTY.ORG](mailto:TRETHEWAY-ALI@LEVYCOUNTY.ORG)

COVER PAGE

ITB\_2023\_007 – PAINT STRIPING AND MARKING SERVICES

LAST DAY FOR QUESTIONS: 8/17/22

DUE DATE AND TIME: 8/22/22, 2:00 P.M., EST

SUMMARY OF SCOPE: Levy County is seeking bids from firms or companies who can provide Paint Striping and Marking Services for the fiscal year 2023 beginning on October 1, 2022 and ending September 30, 2023.

SUBMITTAL OF BID: Levy County only accepts electronic submittals through "E-Bidding" on the DemandStar platform [www.DemandStar.com](http://www.DemandStar.com). In order to submit a bid in response to this solicitation the bidder must be registered with DemandStar.

For questions relating to this Bid, contact Ali Tretheway, Procurement Coordinator at [tretheway-ali@levycounty.org](mailto:tretheway-ali@levycounty.org).

ITEMS THAT MUST BE INCLUDED WITH BID: Submitting an incomplete document may deem the bid non-responsive, causing rejection. Please check each box for each item submitted with bid. Prior to submitting my bid, I have verified that all forms are attached and are considered as part of my bid:

- COVER PAGE
- ATTACHMENT "1" BID PRICING FORM
- SWORN STATEMENT ON PUBLIC ENTITY CRIME FORM
- NON-COLLUSION AFFIDAVIT FORM
- BID SIGNATURE FORM
- DRUG-FREE WORKPLACE FORM
- CONFLICT OF INTEREST DISCLOSURE STATEMENT FORM
- VENDOR INFORMATION FORM
- W9
- CERTIFICATE OF INSURABILITY – AS NOTED IN PART 2, SUBSECTION 2.11
- EVIDENCE THAT THE BIDDER IS QUALIFIED TO TRANSACT BUSINESS IN THE STATE OF FLORIDA
- COPIES OF ANY APPLICABLE AND CURRENT LICENSE OR CERTIFICATIONS REQUIRED

Company Name: Emerald Coast Striping LLC  
 Name: Eli Garrett  
 Address: 1981 N. East Ave. Panama City, FL 32405  
 Mailing Address (if Different): same  
 Email Address (Required): egarrett@ecstriping.com  
 Telephone: 850-213-4675 FEIN: 20-8743994

By signing the form, I acknowledge I have read and understand, and my firm complies with all General Conditions and requirements set forth herein:

SIGNATURE OF AUTHORIZED REPRESENTATIVE: Eli C. Garrett

DATE SUBMITTED: 8-22-22

THIS DOCUMENT MUST BE COMPLETED AND RETURNED WITH YOUR SUBMITTAL

## ATTACHMENT 1 BID PRICING FORM

The undersigned, as bidder, does hereby declare that he/she has read the Invitation to Bid, Scope of Work, Intent and General Information, General Conditions, Bid Form and Required and Optional Forms, any addenda that may have been issued, and any other documentation for ITB\_2023\_007, Paint Striping and Marking Services. All bid prices shall be all inclusive.

Each Bidder shall state the unit price for each item.

1. Messages Painted:		
a. STOP Messages		\$ <u>65.00</u>
b. School Messages		\$ <u>85.00</u>
2. Symbols Painted:		
a. Railroad Symbol		\$ <u>100.00</u>
b. Railroad envelope at Railroad Crossing		\$ <u>1,500.00</u>
3. Directional Arrow Painted:		\$ <u>45.00</u>
4. Linear Feet Painted or Gross Miles Painted:	Linear Feet Price	Gross Miles Price
a. 24" Stop Bars	\$ <u>2.50</u>	\$ <u>12,500.00</u>
b. 4" Edge Line	\$ <u>0.14</u>	\$ <u>700.00</u>
c. 4" Skip Yellow	\$ <u>0.08</u>	\$ <u>350.00</u>
d. 4" Solid Yellow	\$ <u>0.14</u>	\$ <u>700.00</u>
e. 6" Edge Line	\$ <u>0.17</u>	\$ <u>900.00</u>
f. 6" Skip Yellow	\$ <u>0.09</u>	\$ <u>450.00</u>
g. 6" Solid Yellow	\$ <u>0.17</u>	\$ <u>900.00</u>
5. Crosswalk Linear Feet Painted:		
a. 12" Crosswalk	\$ <u>2.00</u>	
b. 24" Crosswalk	\$ <u>2.50</u>	

Bid prices shall be firm for the Contract period (October 1, 2022, through September 30, 2023). Please list any substitutions (if any), on a separate page.

Name of Business: Emerald Coast Striping LLC.

Contact Person: Eli Coorell

Email Address: ecoorell@ecstriping.com

Date: 8-22-22

Authorized Signature: Eli C. Coorell

THIS DOCUMENT MUST BE COMPLETED AND RETURNED WITH YOUR SUBMITTAL

SWORN STATEMENT ON PUBLIC ENTITY CRIME

Sworn Statement Pursuant to Section 287.133(3)(a), Florida Statutes on Public Entity Crime

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

1. This sworn statement is submitted to Levy County Board of Commissioners

By Eli Gezell Managing Partner  
(Print this individuals name and title)

For Emerald Coast Striping LLC  
(Print name of entity submitting statements)

Whose business address is 1901 N. East Ave. Panama City, FL 32405

and if applicable whose Federal Employer Identification Number (FEIN) is 20-8743994.

If the entity has no FEIN, include Social Security Number of the individual signing this Sworn Statement:

\_\_\_\_\_

2. I understand that a "public entity crime" as defined in paragraph 287.133(1)(a), Florida Statutes, mean violation of any state or federal law by a person with respect to and directly related to the transactions of business with any public entity or with an agency or political subdivision of any other state or with the United States including, but not limited to any bid or contract for goods or services to be provided to any public entity or any agency or political subdivision of any other state or the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
3. I understand that "convicted" or "convection" as defined in Paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or conviction of a public entity crime, with or without 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 a Jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
4. I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), Florida Statutes, means:
  - a. A predecessor or successor of a person convicted of 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 an affiliate.
5. 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, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.



6. Based on information and belief, the statement which I have marked below is true in a relation to the entity submitting this sworn statement. (Please 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, or any affiliate of the entity has been charged with and convicted of a public entity crime within the past 36 months.

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 within the past 36 months AND (Please indicate which additional statement applies).

The entity submitting the 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 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 within the past 36 months. However, there has been a subsequent proceeding before a Hearing Officers of the State of Florida, Division of Administrative Hearings and the Final Order by the Hearing Officer determined that it was not in the public interest place the entity submitting this sworn statement on the convicted vendor list. (Attached is 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 THE PUBLIC ENTITY ONLY AND, THAT THIS FORM IS VALID THROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED AND FOR THE PERIOD OF THE CONTRACT ENTERED INTO, WHICHEVER PERIOD IS LONGER. 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.

Eli C. Gerrell

(Signature)

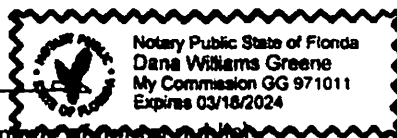
State of Florida

County of Leon

Sworn to (or affirmed) and subscribed before me by means of  physical presence or  online notarization, this 22 day of August, 2022, by Eli C. Gerrell (name), as Managing Partner (title) for Emerald Coast Striping (name of bidder) Personally Known  QR Produced Identification  (type of identification).

Dana Williams Greene

(Signature) Notary Public



(SEAL)

(Printed, typed or stamped commissioned name of notary public)

My Commission expires \_\_\_\_\_

**THIS DOCUMENT MUST BE COMPLETED AND RETURNED WITH YOUR SUBMITTAL**

NON-COLLUSION AFFIDAVIT

I, Eli Gerrell of the County of Leon

According to law on my oath, and under penalty of perjury, depose and say that:

1. I am Managing Partner of the firm of Emerald Coast Striping providing that I executed the said bid with full authority to do so.
2. This response has been arrived at independently without collusion, consultation, communication or agreement for the purpose of restricting competition, as to any matter relating to qualifications or responses of any other responder to induce any other person, partnership or corporation to submit, or not to submit, a response for the purpose of restricting competition;
3. The statements contained in this affidavit are true and correct, and made with full knowledge that Levy County relies upon the truth of the statements contained in this affidavit in awarding contracts for any services resulting from this ITB for said project.

Eli C. Gerrell

8-27-22

(Signature of Proposer Representative)

(Date)

State of Florida

County of Leon

Sworn to (or affirmed) and subscribed before me by means of  physical presence or  online notarization, this 22 day of August, 2022, by Eli C. Gerrell (name), as Managing Partner (title) for Emerald Coast Striping (name of bidder) Personally known  OR Produced Identification  (type of identification).

(Signature) Notary Public

Dana Williams Greene

(Printed, typed or stamped commissioned name of notary public)



(SEAL)

My Commission expires \_\_\_\_\_

THIS DOCUMENT MUST BE COMPLETED AND RETURNED WITH YOUR SUBMITTAL

BID SIGNATURE FORM

The undersigned attests to his/her authority to submit this bid and to bind the entity/firm herein named to perform in accordance with an agreement entered into with the County, if the entity/firm is awarded the agreement by the County. The undersigned further certifies that he/she has read the entire Invitation to Bid package, and any other documentation relating to the Invitation to Bid, and that this bid is submitted with full knowledge and understanding of the requirements and time constraints noted herein, and that the prices bid herein are guaranteed for a period of ninety (90) days following the due date for bids.

Type of Organization (please check one):

- INDIVIDUAL
- PARTNERSHIP
- CORPORATION
- JOINT VENTURE
- LLC

Firm Name: Emerald Coast Striping LLC

Home Office Address: 1701 N. East Ave.

City, State, Zip: Panama City, FL 32405

Address (Servicing Levy County if Different from Above): 4454 Entorpot Blvd.

Tallahassee, FL 32310

Name/Title of Levy County Representative: \_\_\_\_\_

Email: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Is Bidder a small or minority business, women's business enterprise, or labor surplus area firm?  Yes  No

As addenda are considered binding as if contained in the original Invitation to Bid, it is critical each Bidder acknowledge receipt of same. The submittal may be considered void if receipt of addendum is not acknowledged.

Receipt of Addenda Acknowledged:

Addendum No. \_\_\_\_\_ Dated \_\_\_\_\_ Signature \_\_\_\_\_

Addendum No. \_\_\_\_\_ Dated \_\_\_\_\_ Signature \_\_\_\_\_

Addendum No. \_\_\_\_\_ Dated \_\_\_\_\_ Signature \_\_\_\_\_

Addendum No. \_\_\_\_\_ Dated \_\_\_\_\_ Signature \_\_\_\_\_

THIS DOCUMENT MUST BE COMPLETED AND RETURNED WITH YOUR SUBMITTAL

DRUG-FREE WORKPLACE FORM

The undersigned Bidder in accordance with Section 287.087, Florida Statutes hereby certifies that the Bidder Emerald Coast Striping (name of firm or individual) does:

1. Publish a statement notifying employees that the unlawful manufacture, distributions, 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 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.
3. Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
4. In the statement specified in subsection (1), 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 or of any controlled substance law of the United State 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 so 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 the statement, I certify that this firm complies fully with the above requirements.

Name of Bidder: Emerald Coast Striping  
Signature: Eli C. Russell  
Title: Managing Partner  
Date: 8-22-22

THIS DOCUMENT MUST BE COMPLETED AND RETURNED WITH YOUR SUBMITTAL

CONFLICT OF INTEREST DISCLOSURE STATEMENT

The award hereunder is subject to the provisions of Chapter 112, Florida Statutes. All bidders must disclose with their bids whether any officer, director, employee or agent is also an officer or an employee of the Board of County Commissioners. All bidders must disclose whether any officer, partner, director or proprietor is the spouse or child of one of the members of the Board of County Commissioners. All bidders must disclose the name of any County officer or employee who owns, directly or indirectly, an interest of five percent (5%) or more in the firm or any of its branches or affiliates. All bidders must also disclose the name of any employee, agent lobbyist, previous employee of the Board, or other person, who has received or will receive compensation of any kind in connection with the response to this ITB. All bidders are also required to include a disclosure statement of any potential conflict of interest that the bidder may have due to other clients, contracts, or interest associated with the performance of services under this ITB and any resulting agreement. Use additional sheets if necessary.

Names of Officer, Director, Employee or Agent that is also an Employee of the Board:

\_\_\_\_\_

Names of Officer, Partner, Director or Proprietor who is spouse or child of Board Member:

\_\_\_\_\_

Names of County Officer or Employee that owns five percent (5%) or more in Bidders Firm:

\_\_\_\_\_

Names of applicable person(s) who have received compensation:

\_\_\_\_\_

Description of potential conflict(s) with other clients, contracts or interests:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

None of the above applicable:

Signature: Eli C. Gessell

Printed Name: Eli Gessell

Bidder Name: Emerald Coast Striping LLC

Date: 8-22-22

THIS DOCUMENT MUST BE COMPLETED AND RETURNED WITH YOUR SUBMITTAL

VENDOR INFORMATION FORM

DATE: 5-22-22

COMPANY NAME: Emerald Coast Striping LLC

PHYSICAL ADDRESS: 1901 N. East Ave. Panama City, FL 32405

MAILING ADDRESS: same

CITY: Panama City STATE: FL ZIP: 32405

TELEPHONE NUMBER: 850-215-4875

FAX NUMBER: 850-271-4875

TOLL FREE NUMBER: 850-215-4875

EMAIL: EGJ@ecslstriping.com

FEID NUMBER: 20-8743994 OR SSN: \_\_\_\_\_

CONTACT PERSON: Eli Geszell

TITLE: Managing Partner

CONTACT NUMBER: 850-545-5965

\*\*\*\*\*

The information requested above is necessary to update our files or to add your name to the County's vendor list. You are a vital part of the operation of Levy County and we want to thank you for your support. The information on this form will allow us to pay you for the goods and/or services we have received in a timely manner and give us the ability to contact the necessary person in case there is a problem or question in processing.

THIS DOCUMENT MUST BE COMPLETED AND RETURNED WITH YOUR SUBMITTAL

## Request for Taxpayer Identification Number and Certification

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

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type.  
See Specific Instructions on page 3.

<p><b>1</b> Name (as shown on your income tax return). Name is required on this line, do not leave this line blank. <b>Emerald Coast Striping, LLC</b></p> <p><b>2</b> Business name/disregarded entity name, if different from above</p> <p><b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check <b>only one</b> of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC    <input type="checkbox"/> C Corporation    <input checked="" type="checkbox"/> S Corporation    <input type="checkbox"/> Partnership    <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C-Corporation, S-S corporation, P-Partnership) ▶ _____</p> <p><b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p>	<p><b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><small>(Applies to accounts maintained outside the U.S.)</small></p>
<p><b>5</b> Address (number, street, and apt. or suite no.) See instructions. <b>1901 N East Avenue</b></p> <p><b>6</b> City, state, and ZIP code <b>Panama City, FL 32405</b></p> <p><b>7</b> List account number(s) here (optional)</p>	<p>Requester's name and address (optional)</p>

### Part I Taxpayer Identification Number (TIN)

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

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

<b>Social security number</b>	
[ ] [ ] [ ] - [ ] [ ] - [ ] [ ] [ ] [ ] [ ] [ ]	
<b>or</b>	
<b>Employer identification number</b>	
2 0 - 8 7 4 3 9 9 4	

### Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶ 1/4/22
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### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### Purpose of Form

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 (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
  - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
  - 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)
  - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
  - Form 1099-C (canceled debt)
  - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*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.*



## Florida Department of Transportation

RON DESANTIS  
GOVERNOR

605 Suwannee Street  
Tallahassee, FL 32399-0450

JARED W. PERDUE, P.E.  
SECRETARY

May 17, 2022

EMERALD COAST STRIPING, LLC.  
1901 N. EAST AVE  
PANAMA CITY, FLORIDA 32405

### RE: CERTIFICATE OF QUALIFICATION

The Department of Transportation has qualified your company for the type of work indicated below.

**FDOT APPROVED WORK CLASSES:**  
PAVEMENT MARKING, ROADWAY SIGNING

Unless notified otherwise, this Certificate of Qualification will expire **6/30/2023**.

In accordance with Section 337.14(4), Florida Statutes, changes to Ability Factor or Maximum Capacity Rating will not take effect until after the expiration of the current certificate of prequalification (if applicable).

In accordance with Section 337.14(1), Florida Statutes, an application for qualification must be filed within (4) months of the ending date of the applicant's audited annual financial statements.

If the company's maximum capacity has been revised, it may be accessed by logging into the Contractor Prequalification Application System via the following link:  
**[HTTPS://fdotwp1.dot.state.fl.us/ContractorPreQualification](https://fdotwp1.dot.state.fl.us/ContractorPreQualification)**

Once logged in, select "View" for the most recently approved application, and then click the "Manage" and "Application Summary" tabs.

The company may apply for a Revised Certificate of Qualification at any time prior to the expiration date of this certificate according to Section 14-22.0041(3), Florida Administrative Code (F.A.C.), by accessing the most recently approved application as shown above and choosing "Update" instead of "View." If certification in additional classes of work is desired, documentation is needed to show that the company has performed such work.

All prequalified contractors are required by Section 14-22.006(3), F.A.C., to certify their work underway monthly in order to adjust maximum bidding capacity to available bidding capacity. You can find the link to this report at the website shown above.

Sincerely,

A handwritten signature in black ink that reads "James E. Taylor" followed by two large, stylized initials "AA".

for Alan Autry, Manager  
Contracts Administration Office

AA:cg