

BID COVER PAGE

SUBMIT BIDS TO: Wellington Attn: Clerk's Office 12300 Forest Hill Blvd Wellington, FL 33414	REFER ALL INQUIRIES TO PRIMARY CONTACT: Purchasing Division 12300 Forest Hill Blvd Wellington, FL 33414 Phone:561-791-4154	<h2 style="margin:0;">Wellington</h2> <h1 style="margin:0;">INVITATION TO BID</h1> <p style="margin:0;">COMMODITY/SERVICE</p>
BID TITLE: Supply and Delivery of Road Base and Asphalt Millings		BID NO: 202326

NAME OF FIRM, ENTITY, or ORGANIZATION: Palm Beach Aggregates, LLC.				
NAME OF CONTACT PERSON: Justo Navarro	VENDOR MAILING ADDRESS: 20125 Southern Blvd.	CITY: Loxahatchee	ZIP: 33470	STATE: Fla.
TITLE: Sales Manager	VENDOR HEADQUARTERS ADDRESS (IF DIFFERENT):	CITY:	ZIP:	STATE:
PHONE NUMBER: (561) 795-6550		FEDERAL EMPLOYER IDENTIFICATION NUMBER (EIN): 90-0503744		
EMAIL ADDRESS: jnavarro@palmbeachag.com		STATE OF FLORIDA BUSINESS LICENSE NUMBER (IF APPLICABLE)		
FAX NUMBER: (561) 798-5380				
ORGANIZATIONAL STRUCTURE (Please Check One): Corporation <input checked="" type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> Joint Venture <input type="checkbox"/> Other <input type="checkbox"/>				
<i>If Corporation, please provide the following:</i>				
(A) Date of Incorporation: <u>July</u> / <u>1</u> / <u>2009</u> <small>Month / Day / Year</small>		(B) State or Country of Incorporation:		

V#-526

BID SUBMITTAL

To:

Village of Wellington
12300 Forest Hill Blvd.
Wellington, Florida 33414

Palm Beach Aggregates, LLC.

(Vendor)

agrees to provide material for the 202326 Supply and Delivery of Road Base and Asphalt Millings in accordance with the requirements and specifications of the Bid Documents for the Village of Wellington as specified.

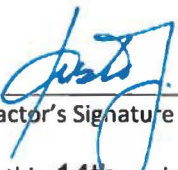
Gentlemen:

The undersigned Bidder has carefully examined the Specification requirements, Bid/Contract Documents and is familiar with the nature and extent of the Work and any local conditions that may in any manner affect the Work to be done.

The undersigned agrees to provide the service called for by the Specifications and Bid Documents, in the manner prescribed therein and to the standards of quality and performance established by the Wellington for the Bid price stated in the spaces herein provided.

The undersigned agrees to the right of the Wellington to hold all Bids and Bid guarantees for a period not to exceed one hundred and twenty (120) days after the date of Bid opening stated in the Invitation to Bid.

The undersigned accepts the invoicing and payment policies specified in the Bid.



Contractor's Signature

Dated this 14th day of June, 2023

(Month)

(Year)

SCHEDULE OF VALUES

(FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-RESPONSIVE)

Item Number	Commodity Description	Unit Cost
1	Supply and Delivery of Road Base	\$ <u>18.55</u> Per Ton
2	*Pick up Road Base with Wellington Vehicle	\$ <u>14.25</u> Per Ton
3	Type III DOT Road Base Delivered	\$ <u>18.55</u> Per Ton
4	Supply and Delivery of #57 Rock	\$ <u>38.60</u> Per Ton
5	*Pick up #57 Rock at Pit with Wellington Vehicle	\$ <u>33.05</u> Per Ton
6	Rip Rap 6" to 12" Boulder with Wellington Vehicle	\$ <u>43.80</u> Per Ton
7	Supply and Delivery of RCA (Recycled Concrete Aggregate) – (Or Equal Product)	\$ <u>N/A</u> Per Ton
8	*Pick up RCA (Recycled Concrete Aggregate) – (Or Equal Product) at Pit With Wellington Vehicle	\$ <u>N/A</u> Per Ton
9	Supply and Delivery of Asphalt Millings	\$ <u>N/A</u> Per Cubic Yard
10	*Pick up Asphalt Millings with Wellington Vehicle	\$ <u>N/A</u> Per Cubic Yard

***Please Note: Picked-Up Price Category – Only Bidder(s) within a 25 mile radius of the Village of Wellington may bid under this category.**

The 25 mile radius is not required for the remaining categories. Bidder(s) are not required to bid on all items.

Bidder understands and agrees that awarded vendor(s) will be paid based upon items and quantities actually accepted by owner. Wellington will evaluate items listed on the Schedule of Values independently. Wellington reserves the right to award each item independently to the lowest, responsive and responsible bidder and to award contracts to multiple proposers. Bidders may bid on any or all individual line items as outlined in the Schedule of Values in which they are licensed and qualified. Any Bid submittal which does not contain prices set opposite each of the items for which there is a blank space will be cause for disqualification. Any items not bid upon shall be indicated "NO BID" in place of the price. . All pricing shall include labor, materials, equipment, fuel, shipping, delivery and all other necessary items.

QUESTIONNAIRE

The following Questionnaire shall be completed and submitted in with the Bid. By submission of this Bid, Bidder guarantees the truth and accuracy of all statements and answers herein contained.

1. How many years has your organization been in business? 14
2. What is the last project of this nature that you have completed?
Bid# 202114 - Supply and Delivery of Road Base & Asphalt Millings
3. Have you ever failed to complete work awarded to you? If so, where and why? No

4. Name three individuals or corporations for which you have performed work and to which you refer:

Maschmeyer Concrete Co.	1142 Watertower Rd., Lake Park, Fla.	(561) 848-9112	dax@maschmeyer.com
<small>Name</small>	<small>Address</small>	<small>Phone</small>	<small>Email</small>
Adonel Concrete Palm Beach	2101 NW 110th Ave., Miami, Fla.	(305) 392-5416	rcardonne@adonelconcret.com
<small>Name</small>	<small>Address</small>	<small>Phone</small>	<small>Email</small>
Central Concrete Supermix	4300 SW 74th Ave., Miami, Fla	(305) 262-3250	matt@supermix.com
<small>Name</small>	<small>Address</small>	<small>Phone</small>	<small>Email</small>

5. List the following information concerning all contracts in progress as of the date of submission of this bid. (In case of co-venture, list the information for all co-venturers.)

Name of Project	Owner	Total Contract Value	Contracted Date of Completion	% of Completion to Date
Maschmeyer Conc. Redimix Plts.	Maschmeyer Concrete	\$6,500,000.00	Ongoing	Ongoing
Adonel Concrete - Redimix Plts.	Adonel Concrete	5,500,000.00	Ongoing	Ongoing
Central Fl. Supermix Plts.	Central Fl. Supermix	4,500,000.00	Ongoing	Ongoing

6. Has the bidder or his or her representative inspected the proposed project and does the Bidder have a complete plan for its performance? Yes
7. Will you subcontract any part of this work? If so, give details including a list of each subcontractor(s) that will perform work in excess of the percent (10%) of the contract amount and the work that will be performed by each subcontractor(s).

Subcontractor	Work to be Performed
Siboney Contracting Co.	Trucking / Freight

8. What equipment do you own that is available for the work? _____

Equipment Type	Equipment Type
Cat 980M Loader #1	Volvo Loader L220E
Cat 980M Loader #2	
Cat 890M Loader #3	

9. What equipment will you purchase for the proposed work? NONE


10. What equipment will you rent for the proposed work? NONE
11. State the name of your proposed project manager and give details of his or her qualifications and experience in managing similar jobs.
Justo Navarro - 38 Years Construction Materials / Freight Logistics
12. The address of principal place of business is 20215 Southern Blvd., Loxahatchee Fla. 33470
13. The names of the Corporate Officers, or Partners, or Individuals doing business under a trade name, are as follows: NA
14. List all organizations which were predecessors to Bidder or in which the principals or officers of the Bidder were principals or officers. NA
15. List and describe all bankruptcy petitions (Voluntary or Involuntary) which have been filed by or against the Bidder, its parent or subsidiaries or predecessor organizations during the past five (5) years. Include in the description the disposition of each such petition. NONE
16. List and describe all successful Performance or Payment Bond claims made to your surety(ies) during the last five (5) years. The list and descriptions should include claims against the bond of the Bidder and its predecessor organization(s). NONE
17. List all claims, arbitrations, administrative hearings and lawsuits brought by or against the Bidder or its predecessor organization(s) during the last five (5) years. The list shall include all case names; case, arbitration, or hearing identification numbers; the name of the project over which the dispute arose; and a description of the subject matter of the dispute. NONE
18. List and describe all criminal proceedings or hearings concerning business related offenses in which the Bidder, its principals or officers or predecessor organization (s) were defendants. NONE
19. Has the Bidder, its principals, officers, or predecessor organization(s) been debarred or suspended from bidding by any government during the last five (5) years? If yes, provide details. NO
20. List and disclose any and all business relations with any members of Wellington Council. NONE

DRUG FREE WORKPLACE

Preference shall be given to businesses with drug-free workplace programs. In order to have a drug-free workplace program, a business must attest to the following:

1. We 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. We 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. We 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. We, 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 States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
5. We 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. We 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.



Contractor's Signature

**SWORN STATEMENT UNDER SECTION 287.133(3)(a),
FLORIDA STATUTES, ON PUBLIC ENTITY CRIMES**

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

1. This sworn statement is submitted to Village of Wellington
[print name of the public entity]
by Palm Beach Aggregates, LLC. for Justo Navarro / Sales Manager
[print name of entity submitting sworn statement] [print individual's name and title]
whose business address is 20125 Southern Blvd. Loxahatchee 33470 Fla. and (if applicable) its Federal Employer Identification
Number (FEIN) is 90-05803744 (If the entity has no FEIN, include the 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)(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 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 of 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 defined in Paragraph 287.133(1)(a), Florida Statutes, 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 an affiliate.

4. I understand that a "person" as defined in Paragraph 287.133(1)(c), 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.

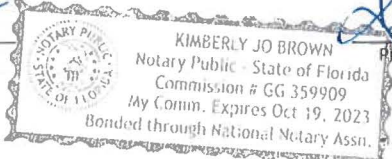
6. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. [Please indicate which statement applies.]
 Neither the entity submitting this sworn statement, nor any officers, directors, executives, partners, shareholders, employees, members, or agents who are active in 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 the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in 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 the 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 THROUGH 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.

STATE OF Florida [signature] _____
COUNTY OF Palm Beach 6/14/2023 [date] _____

Subscribed and Sworn to (or affirmed) before me on June 14, 2023 by Justo Navarro
[date] [name]

He/she is personally known to me or has presented _____ as identification.
[type of identification]

[Notary's Signature and Seal] Kimberly Jo Brown [Print Notary Name and Commission No.] Kimberly Jo Brown Com # 66159909


CERTIFICATION PURSUANT TO FLORIDA STATUTE § 215.4725

I, Justo Navarro, on behalf of Palm Beach Aggregates, LLC.
certifies
Print Name Company Name

that Palm Beach Aggregates, LLC. does not:
Company Name

1. Participate in a boycott of Israel; and
2. Is not on the Scrutinized Companies that Boycott Israel list; and
3. Is not on the Scrutinized Companies with Activities in Sudan List; and
4. Is not on the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List; and
5. Has not engaged in business operations in Cuba or Syria.



Signature

Sales Manager

Title

6/14/2023

Date

CONFLICT OF INTEREST STATEMENT

This Proposal/Agreement (whichever is applicable) is subject to the conflict of interest provisions of the policies and Code of Ordinances of WELLINGTON, the Palm Beach County Code of Ethics, and the Florida Statutes. During the term of this Agreement and any renewals or extensions thereof, the VENDOR shall disclose to WELLINGTON any possible conflicts of interests. The VENDOR's duty to disclose is of a continuing nature and any conflict of interest shall be immediately brought to the attention of WELLINGTON. The terms below shall be defined in accordance with the policies and Code of Ordinances of WELLINGTON, the Palm Beach County Code of Ethics, and Ch. 112, Part III, Florida Statutes.

CHECK ALL THAT APPLY:

NO CONFLICT:

To the best of our knowledge, the undersigned business has no potential conflict of interest for this Agreement due to any other clients, contracts, or property interests.

To the best of our knowledge, the undersigned business has no employment or other contractual relationship with any WELLINGTON employee, elected official or appointed official.

To the best of our knowledge, the undersigned business has no officer, director, partner or proprietor that is a WELLINGTON purchasing agent, other employee, elected official or appointed official. The term "purchasing agent", "elected official" or "appointed official", as used in this paragraph, shall include the respective individual's spouse or child, as defined in Ch. 112, Part III, Florida Statutes.

To the best of our knowledge, no WELLINGTON employee, elected official or appointed official has a material or ownership interest (5% ownership) in our business. The term "employee", "elected official" and "appointed official", as used in this paragraph, shall include such respective individual's relatives and household members as described and defined in the Palm Beach County Code of Ethics.

To the best of our knowledge, the undersigned business has no current clients that are presently subject to the jurisdiction of WELLINGTON's Planning, Zoning and Building Department.

CONFLICT:

The undersigned business, by attachment to this form, submits information which may be a potential conflict of interest due to any of the above listed reasons or otherwise.

THE UNDERSIGNED UNDERSTANDS AND AGREES THAT THE FAILURE TO CHECK THE APPROPRIATE BLOCKS ABOVE OR TO ATTACH THE DOCUMENTATION OF ANY POSSIBLE CONFLICTS OF INTEREST MAY RESULT IN DISQUALIFICATION OF YOUR BID/PROPOSAL OR IN THE IMMEDIATE CANCELLATION OF YOUR AGREEMENT, WHICHEVER IS APPLICABLE.

Palm Beach Aggregates, LLC.

COMPANY NAME



AUTHORIZED SIGNATURE

Justo Navarro

NAME (PRINT OR TYPE)

NON-COLLUSION AFFIDAVIT

State of Florida

County of Palm Beach

Being duly sworn deposes and says:

That he/she is an officer of the parties making the forgoing bid submittal, that the bid is made without prior understanding, agreement, or connection with any individual, firm, partnership, corporation or other entity submitting a bid for the same materials, services, supplies or equipment, either directly or indirectly, and is in all respects fair and without collusion or fraud. No premiums, rebates, or gratuities are permitted with, prior to, or after any delivery of material or provision of services. Any violation of this provision may result in disqualification, contract cancellation, return of materials or discontinuation of services, and the possible removal of Bidder from the vendor Bid lists

Palm Beach Aggregates, LLC.

Name of Bidder

Justo Navarro

Print name of designated signatory



Signature

Sales Manager

Title

On this 14th day of June, 2023 before me appeared Justo Navarro personally known to me to be the person described in and who executed this _____ and acknowledged that (she/he) signed the name freely and voluntarily for the uses and purposes therein described.

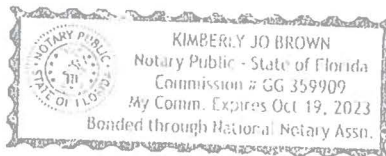
In witness thereof, I have hereunto set my hand and affixed seal the day and year last written above.


Signature

Notary Public in and for the State of Florida

Kimberly Jo Brown
(Name Printed)

(Affix Seal Here)



Residing at _____

My commission expires 10-19-23



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
6/7/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Scott Insurance (Knoxville, TN) 10100 Global Way Knoxville TN 37932	CONTACT NAME: Carla Cook		
	PHONE (A/C, No, Ext): 865-684-1795	FAX (A/C, No): 434-455-8884	
E-MAIL ADDRESS: ccook@scottins.com			
INSURED Palm Beach Aggregates, LLC PO Box 700 Loxahatchee FL 33470	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : Ironshore Specialty Insurance Company (A)		25445
	INSURER B : Travelers Casualty and Surety Company (A++)		19038
	INSURER C : The Travelers Indemnity Company (A++)		25658
	INSURER D : Lloyd's of London		
	INSURER E :		
INSURER F :			

COVERAGES CERTIFICATE NUMBER: 83101768 REVISION NUMBER:

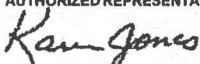
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
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 type="checkbox"/> LOC OTHER:			IEPUW0015198100	6/1/2023	6/1/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/POP AGG \$ 2,000,000 \$
C	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			BA-2S973983-23-14-G	6/1/2023	6/1/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			XSCUW0015198200	6/1/2023	6/1/2024	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	UB-2S973319-23-14-G	6/1/2023	6/1/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D	Leased & Rented Equipment			01MRIM0000508-00	6/1/2023	6/1/2024	Per Item 10,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Bid #202326; Supply and Delivery of Road Base and Asphalt Millings

CERTIFICATE HOLDER

CANCELLATION

Village of Wellington C/O Insurance Tracking Services, Inc. (ITS) PO Box 60840 Las Vegas NV 89160	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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ANNE M. GANNON
CONSTITUTIONAL TAX COLLECTOR
Serving Palm Beach County

Serving you.

P.O. Box 3353, West Palm Beach, FL 33402-3353
 www.pbctax.com Tel: (561) 355-2264

****LOCATED AT****

20125 SOUTHERN BLVD
 LOXAHATCHEE, FL 33470-9259

TYPE OF BUSINESS	OWNER	CERTIFICATION #	RECEIPT #/DATE PAID	AMT PAID	BILL #
81-0102 EXCAVATING	TOMERU ENRIQUE		822.626682 - 08/09/22	\$132.00	B40127611

This document is valid only when receipted by the Tax Collector's Office.

STATE OF FLORIDA
PALM BEACH COUNTY
2022/2023 LOCAL BUSINESS TAX RECEIPT

LBTR Number: 201004064
EXPIRES: SEPTEMBER 30, 2023

This receipt grants the privilege of engaging in or managing any business profession or occupation within its jurisdiction and **MUST** be conspicuously displayed at the place of business and in such a manner as to be open to the view of the public.



9
6-3948

PALM BEACH AGGREGATES LLC
 PALM BEACH AGGREGATES LLC
 20125 SOUTHERN BLVD
 LOXAHATCHEE FL 33470-9259



 An official website of the United States government
[Here's how you know](#)



Menu ☰

My Company Account

My Company Profile

Company Information

Company Name

PALM BEACH AGGREGATES, LLC

Doing Business As (DBA) Name

PALM BEACH AGGREGATES, LLC

Company ID

1634538

Enrollment Date

Jan 27, 2021

Employer Identification Number (EIN)

900503744

Unique Entity Identifier (UEI)

DUNS Number

801693441

Total Number of Employees

20 to 99

NAICS Code

213

Sector

Mining

Subsector

Support Activities for Mining

[Edit Company Information](#)

Employer Category

Employer Category

None of these categories apply

[Edit Employer Category](#)

Company Addresses

Physical Address

20125 STATE ROAD 80
LOXAHATCHEE, FL 33470

Mailing Address

20125 STATE ROAD 80
LOXAHATCHEE, FL 33470

[Edit Company Addresses](#)

Hiring Sites

We have implemented a new policy and require more information for existing and future hiring sites.

Number of Sites

1

[Edit Hiring Sites](#)

Company Access and MOU

My Company is Configured to:

Verify Its Own Employees

Manage and Verify Employees for Clients

Memorandum of Understanding

[View Current MOU](#)

[U.S. Department of Homeland Security](#) [U.S. Citizenship and Immigration Services](#)

[Accessibility](#) [Plug-ins](#) [Site Map](#)

