

BID PROPOSAL FORM BID NO. 2024-007

**BID TO: CITY COMMISSION
CITY OF MARGATE**

1. The undersigned bidder proposes and agrees, if this bid is accepted, to enter into an Agreement with the City in the form included in the Contract Documents to perform the Work as specified or indicated in said Contract Documents entitled:

**SUPPLY AND INSTALL AVIGILON EQUIPMENT
BID NO. 2024-007**

2. Bidder accepts all of the terms and conditions of the Contract Documents, including without limitation those in the Notice Inviting Bids and Instructions to Bidders, dealing with the disposition of the Bid Security.

3. The bid will remain open for the period stated in the Notice Inviting Bids unless otherwise required by law. Bidder will enter into an Agreement within the time and in the manner required in the Notice Inviting Bids and the Instructions to Bidders, and will furnish the insurance certificates, payment bond, and performance bond required by the Contract Documents.

4. It is the Contractor's responsibility to contact the City at (954) 935-5346 prior to the bid opening to determine if any addenda have been issued on the project. Bidder has examined copies of all the Contract Documents including the following addenda (receipt of all of which is acknowledged):

Number 2024-009, Date 03/27/24 - Pre-Bid Conf Sheets - signed
2024-009, Addendum No. 1 03/28/24

5. Bidder has familiarized himself with the nature and extent of the Contract Documents, Work, site, locality where the Work is to be performed, the legal requirements (federal, state and local laws, ordinances, rules and regulations), and the conditions affecting cost, progress or performance of the Work and has made such independent investigations as Bidder deems necessary.

6. This bid is genuine and not made in the interest of or on behalf of any undisclosed person, firm, or corporation and is not submitted in conformity with any agreement or rules of any group, association, organization, or corporation. Bidder has not directly or indirectly induced or solicited any other bidder to submit a false or sham bid. Bidder has not solicited or induced any person, firm or corporation to refrain from bidding and bidder has not sought by collusion to obtain for itself any advantage over any other bidder or over the City.

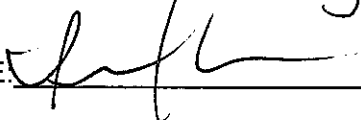
To all the foregoing, and including all Bid Schedule(s) and Information Required of Bidder contained in this Bid Form, said bidder further agrees to complete the Work required under the Contract Documents within the Contract Time stipulated in said Contract Documents, and to accept in full payment thereof the Contract Price based on the Total Bid Price(s) named in the aforementioned Bidding Schedule(s).

NAME OF FIRM: Fortified Security Solutions

ADDRESS: 3229 Anderson Highway, Suite 204

NAME OF SIGNER: Timothy Kinney
(Print or Type)

TITLE OF SIGNER: Managing Partner

SIGNATURE:  DATE: 4/8/24

TELEPHONE NO: 804-601-4080 FACSIMILE NO: _____

EMAIL ADDRESS: tim@fss.us

SCHEDULE OF BID PRICES – BID NO. 2024-007

TO: CITY COMMISSION
CITY OF MARGATE

(Please fill in all blanks and return with your proposal.)

In accordance with your request for proposals and the specifications contained herein, the undersigned proposes the following:

BIDDER AGREES TO PERFORM ALL THE WORK DESCRIBED IN THE CONTRACT DOCUMENTS FOR THE FOLLOWING UNIT PRICES OR LUMP SUMS. BIDS SHALL INCLUDE SALES TAX AND ALL OTHER APPLICABLE TAXES AND BIDDER UNDERSTANDS THAT THE EXTENDED TOTAL FOR EACH AND EVERY ITEM IS THE RESULT OF MULTIPLYING THE QUANTITY TIMES THE UNIT COST STATED IN FIGURES. ANY DISCREPANCY BETWEEN THE UNIT AND TOTAL, THE UNIT PREVAILS.

<u>DESCRIPTION</u>	<u>% OFF MSRP</u>
Avigilon Pricing on Cameras/Encoders/ Avigilon branded parts and accessories (Avigilon wall mounts, mounting arms, infrared emitters)	<u>10.0 %</u>
Avigilon Pricing on NVRs, Servers and Appliances sold by Avigilon	<u>10.0 %</u>
Avigilon Pricing on new Licensing	<u>10.0 %</u>
Ancillary Installation items (conduit, cabling, fittings, etc.)	<u>10.0 %</u> (Add-on to total labor rate for any project).

	<u>HOURLY RATE</u>
Technician Rate – Installation	\$ <u>150.⁰⁰</u>
Technician Rate – Service	\$ <u>150.⁰⁰</u>

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NOTE: CITY RESERVES THE RIGHT TO PURCHASE PRODUCTS ONLY WITHOUT LABOR OR INSTALLATION AT THE DISCOUNTED MSRP PERCENTAGES OFFERED.

ALL BIDS MUST BE SIGNED WITH THE VENDOR NAME AND BY AN OFFICER OR EMPLOYEE HAVING THE AUTHORITY TO BIND THE COMPANY OR FIRM BY SIGNATURE.

SAFETY DATA SHEETS ENCLOSED? YES _____ NO X

SPECIFICATION SHEETS/BROCHURES? YES _____ NO X

HAVE YOUR INSURANCE REPRESENTATIVE REVIEW THE SAMPLE INSURANCE CERTIFICATE TO ENSURE COMPLIANCE.

WILL YOUR FIRM ACCEPT PAYMENT VIA A CITY OF MARGATE
VISA CREDIT CARD? PLEASE CHECK ONE YES _____ NO X

BIDDER'S GENERAL INFORMATION:

The bidder shall furnish the following information. Additional sheets shall be attached as required. Failure to complete Item Nos. 1, 3, and 7 (if required) will cause the bid to be non-responsive and may cause its rejection. In any event, no award will be made until all of the Bidder's General Information (i.e., items 1 through 7 inclusive) is delivered to the City.

- (1) CONTRACTOR'S name and address:

Fortified Security Solutions
3229 Anderson Highway, Suite 204, Powhatan VA 23139

- (2) CONTRACTOR'S telephone number: 804-601-4080

- (3) CONTRACTOR'S license: Primary classification: Alarm Systems II ^{Electrical Contractors Board} / Limited Energy ^{Electrical Contractors Board}

State License Number: EG13000849 / ES12002201

Supplemental classifications held, if any: _____

Name of Licensee, if different from (1) above: Melinda Kinney

- (4) Name of person who inspected site of proposed Work for your firm:

Name: Chris Kinney Date of Inspection: _____

- (5) Name, address, and telephone number of Surety Company and agent who will provide the required bonds on this contract (if required): n/a

- (6) ATTACH TO THIS BID the experience resume of the person who will be designated as Supervisor for this project.
- (7) ATTACH TO THIS BID, a financial statement (If Required), references, and other information, sufficiently comprehensive to permit an appraisal of CONTRACTOR'S current financial condition.
- (8) Subcontractors: The Bidder further proposes that as part of their submittal there is attached a list of subcontracting firms or businesses who will be awarded subcontracts for portions of the work in the event the bidder is awarded the Contract.

REFERENCE SHEET BID NO. 2024-007

In order to receive Bid Award consideration on the proposed bid, it is a requirement that this sheet be completed and returned with your bid/proposal. This information may be used in determining the bid award for this Project.

BIDDER (COMPANY NAME): Fortified Security Solutions
ADDRESS: 3229 Anderson Hwy, Suite 204, Powhatan VA 23139
CONTACT PERSON: Tim Kinney TITLE: Managing Partner
TELEPHONE: 804-601-4080 FACSIMILE: _____
NUMBER OF YEARS IN BUSINESS: 5
ADDRESS OF NEAREST FACILITY: n/a

LIST THREE (3) COMPANIES OR GOVERNMENTAL AGENCIES WHERE THESE PRODUCTS OR SERVICES HAVE BEEN PROVIDED IN THE LAST YEAR.

1. COMPANY NAME: Bureau of Investigative Services
7093 Broad Neck Rd.
ADDRESS: Hanover, VA 23069 PHONE: 804-892-6357
CONTACT PERSON: Judy Reeder TITLE: Office Manager
2. COMPANY NAME: AccentCare, Inc.
17855 North Dallas Pkwy
ADDRESS: Dallas, TX 75287 PHONE: 813-895-7509
CONTACT PERSON: David Fashbinder TITLE: Director
3. COMPANY NAME: Powhatan County
3834 Old Buckingham Rd.
ADDRESS: Powhatan VA 23139 PHONE: 804-598-5644
CONTACT PERSON: Corey Hitt TITLE: IT Network Manager

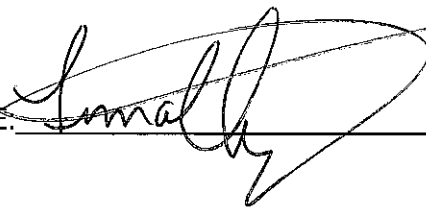
**COMPLIANCE WITH OCCUPATIONAL SAFETY AND HEALTH ACT (O.S.H.A.)
BID NO. 2024-007**

Bidder certifies that all material, equipment, etc. contained in this bid meet all O.S.H.A. requirements. Bidder further certifies that if he/she is the successful bidder, and the material, equipment, etc., delivered is subsequently found to be deficient in any O.S.H.A. requirement in effect on date of delivery, all costs necessary to bring the material, equipment, etc. into compliance with the aforementioned requirements shall be borne by the bidder.

OCCUPATIONAL HEALTH AND SAFETY DATA SHEET REQUIRED:

In compliance with Chapter 442, Florida Statutes, any item delivered from a contract resulting from this bid must be accompanied by a SAFETY DATA SHEET (SDS). The SDS must include the following information:

- A. The chemical name and the common name of the toxic substance.
- B. The hazards or other risks in the use of the toxic substances, including:
 - 1. The potential for fire, explosion, corrosivity and reactivity;
 - 2. The known acute and chronic health effects of risks from exposure, including the medical conditions which are generally recognized as being aggravated by exposure to the toxic substance; and
 - 3. The primary routes of entry and symptoms of overexposure.
- C. The proper precautions, handling practices, necessary personal protective equipment, and other safety precautions in the use of or exposure to the toxic substances, including appropriate emergency treatment in case of overexposure.
- D. The emergency procedure for spills, fire, disposal, and first aid.
- E. A description in lay terms of the known specific potential health risks posed by the toxic substances intended to alert any person reading this information.
- F. The year and month, if available, that the information was compiled and the name, address and emergency telephone number of the manufacturer responsible for preparing the information.

SIGNATURE:  DATE: 4/5/24

**CITY OF MARGATE
STATEMENT OF NO BID**

IF YOU DO NOT INTEND TO BID ON THIS PROPOSAL, RETURN THIS FORM TO ADDRESS WHERE BID IS TO BE SUBMITTED:

I/We have declined to bid on your proposal No **BID NO. 2024-007**

Bid Description: **SUPPLY AND INSTALL AVIGILON EQUIPMENT**

For the following reason:

- ☐ 1. Specifications are too tight, i.e. geared toward one brand or manufacturer only (Explain reason below)
- ☐ 2. Insufficient time to respond to invitation.
- ☐ 3. We do not offer this commodity/service or equivalent.
- ☐ 4. Our product/service schedule would not permit us to perform.
- ☐ 5. Unable to meet specifications.
- ☐ 6. Unable to meet bonding requirements.
- ☐ 7. Specifications unclear (Explain below).
- ☐ 8. Other (Specify below).

REMARKS: n/a

Attach additional pages if required.

I/We understand that if the NO BID form is not executed and returned, our name may be deleted from the list of qualified bidders for the City of Margate.

COMPANY NAME: _____

ADDRESS: _____

TELEPHONE NO: _____ DATE: _____

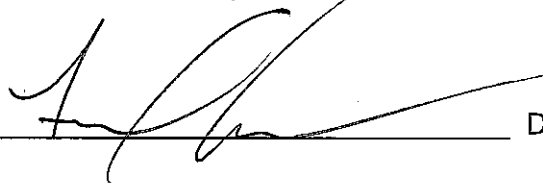
SIGNATURE OF BIDDER: _____

DRUG-FREE WORKPLACE PROGRAM FORM BID NO. 2024-007

In accordance with Section 287.087, State of Florida Statutes, preference shall be given to businesses with Drug-free Workplace Programs. Whenever two or more bids which are equal with respect to price, quality, and service are received for the procurement of commodities or contractual service, a bid received from a business that certifies that it has implemented a Drug-free Workplace Program shall be given preference in the award process. In the event that none of the tied vendors has a Drug-free Workplace program in effect, the City reserves the right to make final Decisions in the City's best interest. In order to have a Drug-free Workplace Program, a business shall:

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
2. Inform employees about the dangers of drug abuse in the workplace, the 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 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, Florida Statutes, or of any controlled substance law of the United States or any State, for a violation occurring in the workplace no later than five (5) days after such conviction.
5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community by any employee who is convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation. If bidder's company has a Drug-free Workplace Program, so certify below:

AS THE PERSON AUTHORIZED TO SIGN THE STATEMENT, I CERTIFY THAT THIS FIRM COMPLIES FULLY WITH THE ABOVE REQUIREMENTS.

SIGNATURE OF BIDDER:  DATE: 4/5/24

OFFEROR'S QUALIFICATION STATEMENT BID NO. 2024-007

The undersigned certifies under oath the truth and correctness of all statements and of all answers to questions made hereinafter:

SUBMITTED TO: City of Margate
(Purchasing Division)

ADDRESS: 5790 Margate Blvd.
Margate, FL 33063

CIRCLE ONE: Corporation Partnership Individual Other

SUBMITTED BY: Fortified Security Solutions

NAME: Tim Kinney

ADDRESS: 3229 Anderson Hwy, Suite 204, Powhatan VA 23139

TELEPHONE NO.: 804-601-4080

FACSIMILE NO.: _____

1. State the true, exact, correct and complete name of the partnership, corporation, trade or fictitious name under which you do business and the address of the place of business. (Attach corporate documents from the State of Florida (sunbiz.org) to this statement.)

The correct name of the Offeror is: Fortified Security Solutions LLC

The address of the principal place of business is:

3229 Anderson Highway, Suite 204
Powhatan VA 23139

2. If Offeror is a corporation, answer the following:

- a. Date of Incorporation: 4/2019
- b. State of Incorporation: Virginia
- c. President's name: Timothy Kinney
- d. Vice President's name: Melinda Kinney
- e. Secretary's name: n/a
- f. Treasurer's name: n/a
- g. Name and address of Resident Agent: _____

3. If Offeror is an individual or a partnership, answer the following:

a. Date of organization: N/A

b. Name, address and ownership units of all partners:

n/a

c. State whether general or limited partnership: n/a

4. If Offeror is other than an individual, corporation or partnership, describe the organization and give the name and address of principals:

N/A

5. If Offeror is operating under a fictitious name, submit evidence of compliance with the Florida Fictitious Name Statute.

N/A

6. How many years has your organization been in business under its present business name?

5

a. Under what other former names has your organization operated?

N/A

7. Indicate registration, license numbers or certificate numbers for the businesses or professions which are the subject of this Proposal. Please attach certificate of competency and/or state registration.

n/a

8. Have you ever failed to complete any work awarded to you? If so, state when, where and why?

No

9. State the names, telephone numbers and last known addresses of three (3) owners, individuals or representatives of owners with the most knowledge of work which you have performed or goods you have provided, and to which you refer (government owners are preferred as references).

See References on Page 31 of this package.

(Name)	(Address)	(Phone Number)
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(Name)	(Address)	(Phone Number)
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(Name)	(Address)	(Phone Number)
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10. List the pertinent experience of the key individuals of your organization (continue on insert sheet, if necessary).

Tim Kinney has 25 years experience in the security industry

11. State the name(s) of the individual(s) who will have personal supervision of the work:

Chris Kinney

THE OFFEROR ACKNOWLEDGES AND UNDERSTANDS THAT THE INFORMATION CONTAINED IN RESPONSE TO THIS QUALIFICATION STATEMENT SHALL BE RELIED UPON BY OWNER IN AWARDING THE CONTRACT AND SUCH INFORMATION IS WARRANTED BY OFFEROR TO BE TRUE. THE DISCOVERY OF ANY OMISSION OR MISSTATEMENT THAT MATERIALLY AFFECTS THE OFFEROR'S QUALIFICATIONS TO PERFORM UNDER THE CONTRACT SHALL CAUSE THE OWNER TO REJECT THE PROPOSAL, AND IF AFTER THE AWARD TO CANCEL AND TERMINATE THE AWARD AND/OR CONTRACT.

Signature: _____

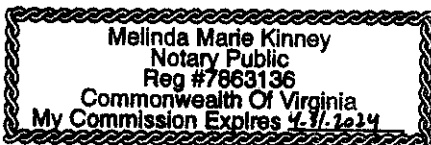
State of ~~Florida~~ Virginia

County of Powhatan

On this the 8th day of April, 2024, before me by means of X physical presence or _____ online notarization, the undersigned Notary Public of the State of Florida, personally appeared Timothy Kinney and
(Name(s) of individual(s) who appeared before notary)

whose name(s) is/are Subscribed to the within instrument, and he/she/they acknowledge that he/she/they executed it.

NOTARY PUBLIC
SEAL OF OFFICE:



NOTARY PUBLIC, STATE OF ~~FLORIDA~~ Virginia

Melinda Kinney
(Name of Notary Public: Print, Stamp or Type as Commissioned.)

- ☒ Personally known to me, or
☐ Produced identification:

(Type of Identification Produced)

☐ DID take an oath, or ☒ DID NOT take an oath

NON-COLLUSIVE AFFIDAVIT FOR BID NO. 2024-007

State of Virginia

County of Powhatan

Timothy Kinney being first duly sworn, deposes and says that:

He/she is the Owner (Owner, Partner, Officer, Representative or Agent) of Fortified Security Solutions the Offeror that has submitted the attached Proposal;

He/she is fully informed regarding the preparation and contents of the attached Proposal and of all pertinent circumstances regarding such Proposal;

Such Proposal is genuine and is not a collusive or sham Proposal;

Neither the said Offeror nor any of its officers, partners, owners, agents, representatives, employees or parties in interest, including this affiant, have in any way colluded, conspired, connived or agreed, directly or indirectly, with any other Offeror, firm, or person to submit a collusive or sham Proposal in connection with the Work for which the attached Proposal has been submitted; or to refrain from bidding in connection with such Work; or have in any manner, directly or indirectly, sought by agreement or collusion, or communication, or conference with any Offeror, firm, or person to fix the price or prices in the attached Proposal or of any other Offeror, or to fix any overhead, profit, or cost elements of the Proposal price or the Proposal price of any other Offeror, or to secure through any collusion, conspiracy, connivance, or unlawful agreement any advantage against (Recipient), or any person interested in the proposed Work;

The price or prices quoted in the attached Proposal are fair and proper and are not tainted by any collusion, conspiracy, connivance, or unlawful agreement on the part of the Offeror or any other of its agents, representatives, owners, employees or parties in interest, including this affiant.

Signed, sealed, and delivered in the presence of:

Jeane Ashman
Witness

[Signature]
Witness

By [Signature]

Timothy Kinney
Printed Name
MBR
Title

ACKNOWLEDGMENT
NON-COLLUSIVE AFFIDAVIT FOR BID NO. 2024-007

State of Florida Virginia
County of Dowd

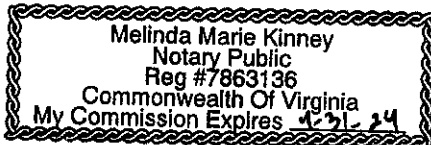
On this the 8th day of April, 2024, before me by means of x physical presence or online notarization, the undersigned Notary Public of the State of Florida, personally appeared

Timothy Kinney
(Name(s) of individual(s) who appeared before notary)

whose name(s) is/are Subscribed to within the instrument, and he/she/they acknowledge that he/she/they executed it.

WITNESS my hand
and official seal.

NOTARY PUBLIC
SEAL OF OFFICE:



Melinda Kinney
NOTARY PUBLIC, STATE OF FLORIDA Virginia

Melinda Kinney
(Name of Notary Public: Print,
Stamp, or Type as Commissioned)

☒ Personally known to me, or
☐ Produced identification

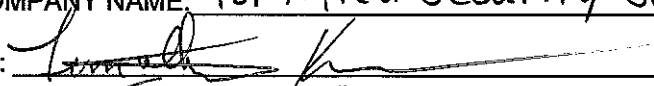
(Type of Identification Produced)

☐ DID take an oath, or ☒ DID NOT take an oath

SCRUTINIZED COMPANIES CERTIFICATION

I hereby swear or affirm that as of the date below this company is not listed on a Scrutinized Companies list created pursuant to 215.4725, 215.473, or 287.135, Florida Statutes. Pursuant to 287.135, Florida Statutes I further affirm that:

1. This company is not participating in a boycott of Israel such that it is not refusing to deal, terminating business activities, or taking other actions to limit commercial relations with Israel, or persons or entities doing business in Israel or in Israeli-controlled territories, in a discriminatory manner.
2. This Company does not appear on the Scrutinized Companies with Activities in Sudan List where the State Board of Administration has established the following criteria:
 - a. Have a material business relationship with the government of Sudan or a government- created project involving oil related, mineral extraction, or power generation activities, or
 - b. Have a material business relationship involving the supply of military equipment, or
 - c. Impart minimal benefit to disadvantaged citizens that are typically located in the geographic periphery of Sudan, or
 - d. Have been complicit in the genocidal campaign in Darfur.
3. This Company does not appear on the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List where the State Board of Administration has established the following criteria:
 - a. Have a material business relationship with the government of Iran or a government- created project involving oil related or mineral extraction activities, or
 - b. Have made material investments with the effect of significantly enhancing Iran's petroleum sector.
4. This Company is not engaged in business operations in Cuba or Syria.

VENDOR/COMPANY NAME: Fortified Security Solutions
SIGNATURE: 
PRINTED NAME: Timothy Kinney
TITLE: MDR DATE: 4/5/24

The scrutinized company list is maintained by the State Board of Administration and available at <http://www.sbafla.com/>

CITY OF MARGATE E-VERIFY FORM

Project Name:	Supply and Install of Arvigilon Equipment
Project No.: Bid	2024-007

ACKNOWLEDGEMENT

Definitions:

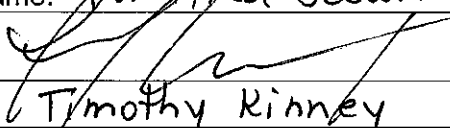
"Contractor" means a person or entity that has entered or is attempting to enter into a contract with a public employer to provide labor, supplies, or services to such employer in exchange for salary, wages, or other remuneration.

"Subcontractor" means a person or entity that provides labor, supplies, or services to or for a contractor or another subcontractor in exchange for salary, wages, or other remuneration.

Effective January 1, 2021, public and private employers, contractors and subcontractors will begin required registration with, and use of the E-verify system in order to verify the work authorization status of all newly hired employees. Vendor/Consultant/Contractor acknowledges and agrees to utilize the U.S. Department of Homeland Security's E-Verify System to verify the employment eligibility of:

- All persons employed by Vendor/Consultant/Contractor to perform employment duties within Florida during the term of the contract; and
- All persons (including subvendors/subconsultants/subcontractors) assigned by Vendor/Consultant/Contractor to perform work pursuant to the contract with the Department. The Vendor/Consultant/Contractor acknowledges and agrees that use of the U.S. Department of Homeland Security's E-Verify System during the term of the contract is a condition of the contract with the City of Margate; and
- Should vendor become successful Contractor awarded for the above-named project, by entering into this Contract, the Contractor becomes obligated to comply with the provisions of Section 448.095, Fla. Stat., "Employment Eligibility," as amended from time to time. This includes but is not limited to utilization of the E-Verify System to verify the work authorization status of all newly hired employees, and requiring all subcontractors to provide an affidavit attesting that the subcontractor does not employ, contract with, or subcontract with, an unauthorized alien. The contractor shall maintain a copy of such affidavit for the duration of the contract. Failure to comply will lead to termination of this Contract, or if a subcontractor knowingly violates the statute, the subcontract must be terminated immediately. Any challenge to termination under this provision must be filed in the Circuit Court no later than 20 calendar days after the date of termination. If this contract is terminated for a violation of the statute by the Contractor, the Contractor may not be awarded a public contract for a period of 1 year after the date of termination and shall be liable for any additional costs incurred by the City as a result of the termination.

COMPANY CONTACT INFORMATION

Company Name:	Fortified Security Solutions
Authorized Signature:	
Print Name:	Timothy Kinney
Title	Managing Partner
Date:	4/5/24
Phone:	804-601-4080
Email:	timefss.us
Website:	www.fortifiedsecuritysolutions.com