

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	<u> N/A </u>	Date	<u> 4/8/2024 </u>
	<u> </u>		<u> </u>
	<u> </u>		<u> </u>

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.

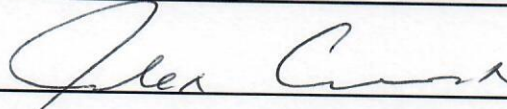
To all the foregoing, and including all Bid Schedule(s) and Information Required of Bidder contained in this Bid Form, said bidder further agrees to complete the Work required under the Contract Documents within the Contract Time stipulated in said Contract Documents, and to accept in full payment thereof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

NAME OF FIRM: CSI VIDEO & SECURITY, LLC

ADDRESS: 904 SW 2ND PLACE POMPANO, FL 33069

NAME OF SIGNER ALEX ESCOBAR
(Print or Type)

TITLE OF SIGNER MANAGING MEMBER

SIGNATURE:  DATE: 4/8/2024

TELEPHONE NO: (954) 773-9910 FACSIMILE NO: N/A

EMAIL ADDRESS: alex@csivideo.net

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)	<div>30</div> <div>%</div>
Avigilon Pricing on NVRs, Servers and Appliances sold by Avigilon	<div>30</div> <div>%</div>
Avigilon Pricing on new Licensing	<div>30</div> <div>%</div>
Ancillary Installation items (conduit, cabling, fittings, etc.)	<div>10</div> <div>% (Add-on to total labor rate for any project).</div>
	<u>HOURLY RATE</u>
Technician Rate – Installation	<div>\$</div> <div>75.00</div>
Technician Rate – Service	<div>\$</div> <div>65.00</div>

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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 ☒

SPECIFICATION SHEETS/BROCHURES? YES _____ NO ☒

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 ☐

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:
CSI VIDEO & SECURITY, LLC
904 SW 2ND PLACE
POMPANO BEACH, FL 33069
- (2) CONTRACTOR'S telephone number: (954) 773-9910
- (3) CONTRACTOR'S license: Primary classification: ALARM SYSTEMS CONTRACTOR
State License Number: EF20000752
Supplemental classifications held, if any: N/A
Name of Licensee, if different from (1) above: N/A
- (4) Name of person who inspected site of proposed Work for your firm:
Name: ALEX ESCOBAR Date of Inspection: 04/09/2024
- (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): CSI VIDEO & SECURITY, LLC
ADDRESS: 904 SW 2ND PLACE POMPANO, FL 33069
CONTACT PERSON: ALEX ESCOBAR TITLE: MANAGING MEMBER
TELEPHONE: (954)214-8800 FACSIMILE: _____
NUMBER OF YEARS IN BUSINESS: 19 YEARS
ADDRESS OF NEAREST FACILITY: 904 SW 2ND PLACE POMPANO, FL 33069

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

1. COMPANY NAME: SCHOOL BOARD OF BROWARD COUNTY
ADDRESS: 7720 WEST OAKLND PARK BLVD SUNRISE, FL 33351 PHONE: (754) 321-0300
CONTACT PERSON: TERESA MACRI TITLE: DIRECTOR, INFORMATION SECURITY
2. COMPANY NAME: ST. LUCIE PUBLIC SCHOOLS
ADDRESS: 9461 BRANDYWINE LANE PORT ST. LUCIE, FL 34986 PHONE: (772) 429-7577
CONTACT PERSON: KEITH HISEY TITLE: IT SECURITY MANAGER
3. COMPANY NAME: FLORIDA ATLANTIC UNIVERSITY
ADDRESS: 777 GLADES ROAD BOCA RATON, FL 33431 PHONE: (561) 297-0401
CONTACT PERSON: SERGE FISHER TITLE: SECURITY SUPERVISOR PUBLIC SAFETY

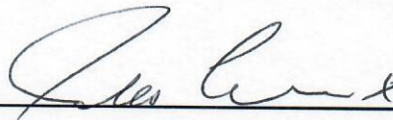
**COMPLIANCE WITH OCCUPATIONAL SAFETY AND HEALTH ACT (O.S.H.A.)
BID NO. 2024-007**

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.

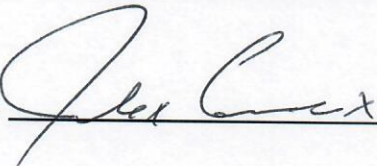
SIGNATURE:  DATE: 4/8/2024

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 of 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: 4/8/2024

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: CSI VIDEO & SECURITY, LLC

NAME: ALEX ESCOBAR

ADDRESS: 904 SW 2ND PLACE POMPANO, FL 33069

TELEPHONE NO.: (954)773-9910

FACSIMILE NO.: N/A

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: CSI VIDEO & SECURITY, LLC

The address of the principal place of business is:

904 SW 2ND PLACE POMPANO BEACH, FL 33069

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

a. Date of Incorporation: _____

b. State of Incorporation: _____

c. President's name: _____

d. Vice President's name: _____

e. Secretary's name: _____

f. Treasurer's name: _____

g. Name and address of Resident Agent: _____

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

a. Date of organization: _____

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

c. State whether general or limited partnership: _____

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

CSI VIDEO & SECURITY, LLC

ALEX ESCOBAR - MGRM - 904 SW 2ND PLACE POMPANO BEACH, FL 33069

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

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

19 YEARS

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.

FL ST. LIC# EF20000752

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).

ED APPLEBY (COCONUT CREEK AUTO MALL)	(954) 683-6111
(Name)	(Phone Number)

ROB ZIMMERMAN (BROWARD SCHOOLS)	(305) 479-5944
(Name)	(Phone Number)

FLOYD HOLLAND (FLORIDA TURNPIKE)	(561) 756-0543
(Name)	(Phone Number)

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

TOM LAHTI - LOW VOLTAGE LICENSE HOLDER - 35 YEARS EXPERIENCE

ROBERT BLAUSTEIN - IT PROGRAMMER - 30 YEARS EXPERIENCE

ALEX ESCOBAR - INSTALLATIONS SUPERVISOR - 30 YEARS EXPERIENCE

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

ALEX ESCOBAR

Signature: [Signature]

County of BROWARD

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

Christina
NOTARY PUBLIC, STATE OF FLORIDA

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

☒ Personally known to me, or
☐ Produced identification:

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

NON-COLLUSIVE AFFIDAVIT FOR BID NO. 2024-007

State of FLORIDA)

County of BROWARD)

ALEX ESCOBAR being first duly sworn, deposes and says that:

He/she is the OWNER - MANAGING MEMBER, (Owner, Partner, Officer, Representative or Agent) of CSI VIDEO & SECURITY, LLC, 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:


Witness


Witness

By 

ALEX ESCOBAR

Printed Name

MANAGING MEMBER

Title

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

State of Florida
County of BROWARD

On this the 8TH day of APRIL, 2024, before me by means of ☒ physical presence or ☐ online notarization, the undersigned Notary Public of the State of Florida, personally appeared

ALEX ESCOBAR

(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:



Janine Escobar
Comm.: HH 382210
Expires: Apr. 3, 2027
Notary Public - State of Florida

Janine Escobar
NOTARY PUBLIC, STATE OF FLORIDA

JANINE ESCOBAR

(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: CSI VIDEO & SECURITY, LLC

SIGNATURE: 

PRINTED NAME: ALEX ESCOBAR

TITLE: MANAGING MEMBER DATE: 4/8/2024

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:	CITY OF MARGATE
Project No.:	

ACKNOWLEDGEMENT

Definitions:

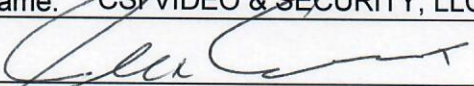
"Contractor" means a person or entity that has entered or is attempting to enter into a contract with a public employer to provide labor, supplies, or services to such employer in exchange for salary, wages, or other remuneration.

"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:	CSIVIDEO & SECURITY, LLC
Authorized Signature:	
Print Name:	ALEX ESCOBAR
Title	MANAGING MEMBER
Date:	4/8/2024
Phone:	(954) 773-9910
Email:	alex@csivideo.net
Website:	WWW.CSIVIDEO.COM



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Limited Liability Company

CSI VIDEO & SECURITY LLC

Filing Information

Document Number	L05000084509
FEI/EIN Number	20-3376003
Date Filed	08/25/2005
State	FL
Status	ACTIVE
Last Event	CANCEL ADM DISS/REV
Event Date Filed	03/20/2009
Event Effective Date	NONE

Principal Address

904 SW 2nd Pl
POMPANO BEACH, FL 33069

Changed: 11/17/2020

Mailing Address

6574 N STATE ROAD 7 #108
COCONUT CREEK, FL 33073

Changed: 11/23/2020

Registered Agent Name & Address

ANGELA DENISE DELGADO CPA PA
665 SE 10TH STREET
DEERFIELD BEACH, FL 33441

Name Changed: 03/14/2018

Address Changed: 01/30/2011

Authorized Person(s) Detail

Name & Address

Title MGRM

ESCOBAR, JANINE M
904 SW 2nd PI
POMPANO BEACH, FL 33069

Title MGRM

ESCOBAR, ALEJANDRO
904 SW 2nd PI
POMPANO BEACH, FL 33069

Annual Reports

Report Year	Filed Date
2022	02/08/2022
2023	01/18/2023
2024	01/03/2024

Document Images

<u>01/03/2024 -- ANNUAL REPORT</u>	View image in PDF format
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<u>01/30/2011 -- ANNUAL REPORT</u>	View image in PDF format
<u>07/22/2010 -- ANNUAL REPORT</u>	View image in PDF format
<u>03/20/2009 -- REINSTATEMENT</u>	View image in PDF format
<u>08/30/2007 -- REINSTATEMENT</u>	View image in PDF format
<u>08/25/2005 -- Florida Limited Liabilites</u>	View image in PDF format



Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

ELECTRICAL CONTRACTORS' LICENSING BOARD

THE ALARM SYSTEM CONTRACTOR I HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

LAHTI, TOMI A

CSI VIDEO & SECURITY LLC
6574 NORTH STATE ROAD 7 SUITE 108
COCONUT CREEK FL 33073

LICENSE NUMBER: EF20000752

EXPIRATION DATE: AUGUST 31, 2024

Always verify licenses online at MyFloridaLicense.com

Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/9/2024

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

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must 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 Frank H. Furman, Inc. 1314 East Atlantic Blvd. P. O. Box 1927 Pompano Beach FL 33061	CONTACT NAME: Lisa O'Brien PHONE (A/C, No, Ext): (954) 943-5050 FAX (A/C, No): (954) 942-6310 E-MAIL: lisa@furmaninsurance.com ADDRESS:
INSURED CSI Video & Security LLC 6574 North State Road 7 #108 Coconut Creek FL 33073	INSURER(S) AFFORDING COVERAGE INSURER A: Starstone Specialty Insurance Company 44776 INSURER B: Technology Insurance Company Inc. 42376 INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER: 24/25 GL 23/24 WC

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	X		WSGL000641	1/12/2024	1/12/2025	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
							MED EXP (Any one person) \$ 5,000
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 3,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG \$ 3,000,000
	OTHER:						\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS						PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS						\$
	<input type="checkbox"/> NON-OWNED AUTOS						
	UMBRELLA LIAB						EACH OCCURRENCE \$
	<input type="checkbox"/> EXCESS LIAB						AGGREGATE \$
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N	N/A	TWC4263538	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						
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

The City of Margate is included as additional insured regarding General Liability as required by written contract.


CERTIFICATE HOLDER**CANCELLATION**


pgarmon@margatefl.com The City of Margate Purchasing Division 5790 Margate Blvd Margate, FL 33063	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 Tina Mangum/LT
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ALEX ESCOBAR

MANAGING OWNER

CONTACT

 (954) 214-8800

 alex@csivideo.net

 Parkland, FL 33076

SKILLS

- Inventory Management
- Leadership Development
- Time Management
- Performance Management

PROFESSIONAL SUMMARY

Seasoned management professional with over 30 years of experience, including a pivotal role at Westinghouse Security. Expert in inventory and leadership development, I've successfully overseen multi-million-dollar projects such as the FL DOT Avigilon installation. Known for exceptional time management and performance management skills, I drive projects to completion with precision and efficiency.

EXPERIENCE

April 1995 - December 1998

General Manager

Westinghouse Security, Pompano Beach, FL

- Built and maintained relationships with vendors and suppliers.
- Recruited team members to maintain adequate staffing levels.
- Provided coaching and mentoring support for employees at all levels of the organization.

January 1999 - May 2005

Owner Manager

Alarm Associates of Broward, Pompano Beach, FL

- Jan 1999 Acquired LBO from Westinghouse Security franchised security office Protection One Security dealership.
- Managed the daily operations of local franchised branch.
- Supervised the sales, installations and service of over 5000 new account sold to Protection One.
- Negotiated contracts and agreements with business partners, vendors, and customers.

January 2005 - Present

Managing Member

CSI VIDEO & SECURITY LLC, Pompano Beach, FL

- 2011 Avigilon Security partner.
- 2013-2020 Designed and sold the security camera and access control structure for FL DOT (Turnpike). Avigilon installation. 10Mill+ Project.
- 2017-2023 Florida Atlantic University. Purchasing contract 3Mill+ Avigilon equipment.
- 2018 to Present Broward Schools. Purchasing contract 6 Mill+ Avigilon equipment.
- 2019-to present Avigilon/Motorola- Elite Partner
- 2019 to present Port St. Lucie School district.5Mill+Avigilon equipment

Supervise and manage low voltage installations projects with over 30 years of experience.

CERTIFICATIONS

- EF20000752 Low Voltage

