

NAME OF FIRM: Southland Painting Corp.

ADDRESS: 2635 Nw 4th Street Ft. Lauderdale, FL 33311

NAME OF SIGNER: Jessie R. Foster  
(Print or Type)

TITLE OF SIGNER: President

SIGNATURE:  DATE: 9/27/2017

TELEPHONE NO: (954)748-2770 FACSIMILE NO: (954)748-2901

**SCHEDULE OF BID PRICES – BID NO. 2017-019**

**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:

| Description  | Unit     | Total Cost  |
|--|----------|---|
| Total cost to furnish labor, licenses, material, equipment, tools, permits and insurance necessary to complete the Wastewater Treatment Plant Chlorine Contact Chamber Rehabilitation project <b>with specified Tnemec products.</b>         | Lump Sum | <b>\$122,000.00</b><br>10% contingency: \$12,200.00 |
| Total cost to furnish labor, licenses, material, equipment, tools, permits and insurance necessary to complete the Wastewater Treatment Plant Chlorine Contact Chamber Rehabilitation project <b>with City approved equivalent products.</b> | Lump Sum | <b>\$110,000.00</b><br>10% Contingency: \$11,000.00 |

**NOTE: Bidders shall submit pricing for one or both options shown above**

**TOTAL FOR ALL ITEMS** **\$232,000.00**

**10% CONTINGENCY\*** **\$23,200.00**

(\*REPRESENTS POSSIBLE COSTS FOR UNFORSEEN WORK, IF APPROVED BY CITY)

**GRAND TOTAL FOR ALL ITEMS** **\$255,200.00**

**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.**

**MATERIAL 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:

Southland Painting Corp.

2635 NW 4th Street Ft. Lauderdale, FL 33311

- (2) CONTRACTOR'S telephone number: (954)748-2770

- (3) CONTRACTOR'S license: Primary classification: Competency License- Painting  
15-PU-19300-X

State License Number: Not applicable for painters

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: Jessie R. Foster Date of Inspection: 8/30/2017

- (5) Name, address, and telephone number of surety company and agent who will provide the required bonds on this contract (if required): Jarrett Merlucci

Nielson, Hoover, & Co. 305-722-2664

8000 Governors Square Blvd. Ste-101 Miami Lakes, FL 33016

- (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. (**Not Required**)

N/A

- (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.

N/A



**BID BOND**

**KNOW ALL MEN BY THESE PRESENTS:**

That we Southland Painting Corp. as  
Principal, and International Fidelity Insurance Company as Surety, are held and  
firmly bound unto CITY OF MARGATE, hereinafter called "CITY" in the sum of  
(\$ 5% ) Five Percent of Amount Bid dollars, (not  
less than 5 percent of the total amount of the Bid) for the payment of which sum, well and truly  
to be made, we bind ourselves, our heirs, executors, administrators, successors, and assigns,  
jointly and severally, firmly by these presents.

**WHEREAS**, said Principal has submitted a Bid to said CITY to perform the WORK required  
under the bidding schedule of the CITY'S Contract Documents entitled:

**BID NO. 2017-019** WASTEWATER TREATMENT PLANT CHLORINE CONTACT CHAMBER REHABILITATION

**NOW THEREFORE**, if said Principal is awarded a contract by said CITY and, within the time  
and in the manner required in the "Notice Inviting Bids" and the "Instructions to Bidders" enters  
into a written Agreement on the form of the agreement bound with said Contract Documents,  
furnishes the required certificates of insurance, and furnishes the required Performance Bond,  
then this obligation shall be null and void, otherwise it shall remain in full force and effect. In the  
event suit is brought upon this bond by said CITY and CITY prevails, said Surety shall pay all  
costs incurred by said CITY in such suit, including a reasonable attorney's fee to be fixed by the  
court.

**SIGNED and SEALED**, this 19th day of September, 2017.

Southland Painting Corp.

(CONTRACTOR)

By:   
(SIGNATURE)

International Fidelity Insurance Company

(SURETY)

By:   
(SIGNATURE)

Charles J. Nielson Attorney-in-Fact

STATE OF FLORIDA, COUNTY OF BROWARD: BEFORE ME PERSONALLY APPEARED THE ABOVE TO ME  
WELL KNOWN AND KNOWN TO ME TO BE THE PERSONS DESCRIBED IN AND WHO EXECUTED THE  
FOREGOING INSTRUMENT, AND ACKNOWLEDGED TO AND BEFORE ME THAT THEY EXECUTED SAID  
INSTRUMENT FOR THE PURPOSES THEREIN EXPRESSED.

WITNESS MY HAND AND OFFICIAL SEAL, THIS 19th DAY OF September, 2017

NOTARY PUBLIC:   
Kristi Messel





# POWER OF ATTORNEY

## INTERNATIONAL FIDELITY INSURANCE COMPANY ALLEGHENY CASUALTY COMPANY

ONE NEWARK CENTER, 20TH FLOOR NEWARK, NEW JERSEY 07102-5207

**KNOW ALL MEN BY THESE PRESENTS:** That **INTERNATIONAL FIDELITY INSURANCE COMPANY**, a corporation organized and existing under the laws of the State of New Jersey, and **ALLEGHENY CASUALTY COMPANY**, a corporation organized and existing under the laws of the State of Pennsylvania, having their principal office in the City of Newark, New Jersey, do hereby constitute and appoint

**BRETT ROSENHAUS, CHARLES J. NIELSON, CHARLES D. NIELSON, JOSEPH P. NIELSON**

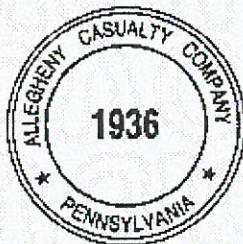
Miami Lakes, FL.

their true and lawful attorney(s)-in-fact to execute, seal and deliver for and on its behalf as surety, any and all bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof, which are or may be allowed, required or permitted by law, statute, rule, regulation, contract or otherwise, including any and all consents for the release of retained percentages and/or final estimates on engineering and construction contracts required by the Department of Transportation, State of Florida, and the execution of such instrument(s) in pursuance of these presents, shall be as binding upon the said **INTERNATIONAL FIDELITY INSURANCE COMPANY** and **ALLEGHENY CASUALTY COMPANY**, as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by their regularly elected officers at their principal offices.

This Power of Attorney is executed, and may be revoked, pursuant to and by authority of the By-Laws of **INTERNATIONAL FIDELITY INSURANCE COMPANY** and **ALLEGHENY CASUALTY COMPANY** and is granted under and by authority of the following resolution adopted by the Board of Directors of **INTERNATIONAL FIDELITY INSURANCE COMPANY** at a meeting duly held on the 20th day of July, 2010 and by the Board of Directors of **ALLEGHENY CASUALTY COMPANY** at a meeting duly held on the 15th day of August, 2000:

"RESOLVED, that (1) the President, Vice President, or Secretary of the Corporation shall have the power to appoint, and to revoke the appointments of, Attorneys-in-Fact or agents with power and authority as defined or limited in their respective powers of attorney, and to execute on behalf of the Corporation and affix the Corporation's seal thereto, bonds, undertakings, recognizances, contracts of indemnity and other written obligations in the nature thereof or related thereto; and (2) any such Officers of the Corporation may appoint and revoke the appointments of joint-control custodians, agents for acceptance of process, and Attorneys-in-fact with authority to execute waivers and consents on behalf of the Corporation; and (3) the signature of any such Officer of the Corporation and the Corporation's seal may be affixed by facsimile to any power of attorney or certification given for the execution of any bond, undertaking, recognizance, contract of indemnity or other written obligation in the nature thereof or related thereto, such signature and seals when so used whether heretofore or hereafter, being hereby adopted by the Corporation as the original signature of such officer and the original seal of the Corporation, to be valid and binding upon the Corporation with the same force and effect as though manually affixed."

IN WITNESS WHEREOF, **INTERNATIONAL FIDELITY INSURANCE COMPANY** and **ALLEGHENY CASUALTY COMPANY** have each executed and attested these presents on this 12th day of March, 2012.

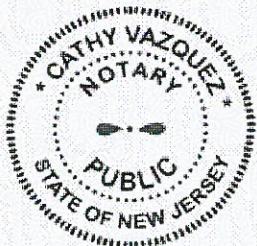


STATE OF NEW JERSEY  
County of Essex

ROBERT W. MINSTER  
Executive Vice President/Chief Operating Officer  
(International Fidelity Insurance Company)  
and President (Allegheny Casualty Company)

On this 12th day of March 2012, before me came the individual who executed the preceding instrument, to me personally known, and, being by me duly sworn, said he is the therein described and authorized officer of **INTERNATIONAL FIDELITY INSURANCE COMPANY** and **ALLEGHENY CASUALTY COMPANY**; that the seals affixed to said instrument are the Corporate Seals of said Companies; that the said Corporate Seals and his signature were duly affixed by order of the Boards of Directors of said Companies.

IN TESTIMONY WHEREOF, I have hereunto set my hand affixed my Official Seal, at the City of Newark, New Jersey the day and year first above written.



A NOTARY PUBLIC OF NEW JERSEY  
My Commission Expires April 16, 2019

### CERTIFICATION

I, the undersigned officer of **INTERNATIONAL FIDELITY INSURANCE COMPANY** and **ALLEGHENY CASUALTY COMPANY** do hereby certify that I have compared the foregoing copy of the Power of Attorney and affidavit, and the copy of the Sections of the By-Laws of said Companies as set forth in said Power of Attorney, with the originals on file in the home office of said companies, and that the same are correct transcripts thereof, and of the whole of the said originals, and that the said Power of Attorney has not been revoked and is now in full force and effect.

IN TESTIMONY WHEREOF, I have hereunto set my hand this

19th

day of

September, 2017

MARIA BRANCO, Assistant Secretary



**PERFORMANCE BOND**

**KNOW ALL MEN BY THESE PRESENTS:**

That we, \_\_\_\_\_ as Contractor and \_\_\_\_\_ as Surety, are held and firmly bound unto the **CITY OF MARGATE, FLORIDA** hereinafter called City in the sum of (\$ \_\_\_\_\_) \_\_\_\_\_ dollars, lawful money of the United States, for the payment of which well and truly to be made, we bind ourselves, our heirs, executors, successors and assigns, jointly and severally, firmly by these presents.

**WHEREAS**, said Contractor has been awarded and is about to enter into the annexed Agreement with said City to perform the Work as specified or indicated in the Bid Documents entitled:

**WASTEWATER TREATMENT PLANT  
CHLORINE CONTACT CHAMBER  
REHABILITATION  
BID # 2017-019**

**NOW, THEREFORE**, if the said Contractor shall fully and faithfully perform all the requirements of said Bid Documents required to be performed on its part, at the times and in the manner specified herein, then this obligation shall be null and void, otherwise it shall remain in full force and effect.

**PROVIDED**, that any alterations in the Work to be done or the materials to be furnished, or changes in the time of completion, which may be made pursuant to the terms of said Bid Documents, shall not in any way release said Contractor or said Surety thereunder, nor shall any extensions of time granted under the provisions of said Bid Documents, release either said Contractor or said Surety, and notice of such alterations or extensions of the Agreement is hereby waived by said Surety.

**SIGNED and SEALED**, this \_\_\_\_\_ day of \_\_\_\_\_, 2017.

\_\_\_\_\_  
(CONTRACTOR)

\_\_\_\_\_  
(SURETY)

BY: \_\_\_\_\_  
(SIGNATURE)

BY: \_\_\_\_\_  
(SIGNATURE)

STATE OF FLORIDA, COUNTY OF BROWARD:

BEFORE ME PERSONALLY APPEARED THE ABOVE, KNOWN TO ME TO BE THE PERSONS DESCRIBED IN AND WHO EXECUTED THE FOREGOING INSTRUMENT, AND ACKNOWLEDGED TO AND BEFORE ME THAT THEY EXECUTED SAID INSTRUMENT FOR THE PURPOSES THEREIN EXPRESSED.

WITNESS MY HAND AND OFFICIAL SEAL, THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 2017.

NOTARY PUBLIC: \_\_\_\_\_

**PAYMENT BOND**

**KNOW ALL MEN BY THESE PRESENTS:**

That we \_\_\_\_\_ as Contractor and \_\_\_\_\_ as Surety, are held and firmly bound unto the **CITY OF MARGATE, FLORIDA**, hereinafter called City, in the sum of (\$ \_\_\_\_\_) dollars, for the payment of which sum well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.

**WHEREAS**, said Contractor has been awarded and is about to enter into the annexed Agreement with said City to perform the Work as specified or indicated in the Contract Documents entitled:

**WASTEWATER TREATMENT PLANT  
CHLORINE CONTACT CHAMBER  
REHABILITATION  
BID # 2017-019**

**NOW THEREFORE**, if said Contractor, or subcontractor, fails to pay for any materials, equipment, or other supplies, or for rental of same, used in connection with the performance of work contracted to be done, or for amounts due under applicable State law for any work or labor thereon, said Surety will pay for the same in an amount not exceeding the sum specified above, and, in the event suit is brought upon this bond, a reasonable attorney's fee to be fixed by the court. This bond shall inure to the benefit of any persons, companies, or corporations entitled to file claims under applicable State law.

**PROVIDED**, that any alterations in the Work to be done or the materials to be furnished, or changes in the time of completion, which may be made pursuant to the terms of said Contract Documents, shall not in any way release said Contractor or said Surety thereunder, nor shall any extensions of time granted under the provisions of said Contract Documents release either said Contractor or said Surety, and notice of such alterations or extensions of the Agreement is hereby waived by said Surety.

**SIGNED and SEALED**, this \_\_\_\_\_ day of \_\_\_\_\_, 2017.

\_\_\_\_\_  
(CONTRACTOR)

\_\_\_\_\_  
(SURETY)

By: \_\_\_\_\_  
(SIGNATURE)

By: \_\_\_\_\_  
(SIGNATURE)

STATE OF FLORIDA, COUNTY OF BROWARD:

BEFORE ME PERSONALLY APPEARED THE ABOVE, KNOWN TO ME TO BE THE PERSONS DESCRIBED IN AND WHO EXECUTED THE FOREGOING INSTRUMENT, AND ACKNOWLEDGED TO AND BEFORE ME THAT THEY EXECUTED SAID INSTRUMENT FOR THE PURPOSES THEREIN EXPRESSED.

WITNESS MY HAND AND OFFICIAL SEAL, THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 2017

NOTARY PUBLIC: \_\_\_\_\_



## COMPLIANCE WITH OCCUPATIONAL SAFETY AND HEALTH ACT

Bidder certifies that all material, equipment, etc. contained in this bid meets 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 MATERIAL 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 MATERIAL SAFETY DATA SHEET (MSDS). The MSDS 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: 9/27/2017

**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: 2017-019

**Bid Description: WASTEWATER TREATMENT PLANT CHLORINE CONTACT  
CHAMBER REHABILITATION**

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: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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: \_\_\_\_\_



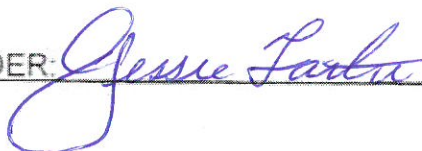
## DRUG-FREE WORKPLACE PROGRAM FORM BID NO. 2017-019

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, proposals, or replies that are equal with respect to price, quality, and service are received for the procurement of commodities or contractual services, a bid, proposal, or reply received from a business that certifies that it has implemented a drug-free workplace program shall be given preference in the award process. 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 or of any controlled substance law of the United States or 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: 9/27/2017

OFFEROR'S QUALIFICATION STATEMENT BID NO.2017-019

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

SUBMITTED BY: Southland Painting Corp.

Corporation  
Partnership  
Individual  
Other

NAME: Jessie R. Foster

ADDRESS: 2635 Nw 4th Street Ft. Lauderdale, FL 33311

TELEPHONE NO.: (954)748-2770

FACSIMILE NO.: (954)748-2901

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.

The correct name of the Offeror is: Southland Painting Corp.

The address of the principal place of business is:

2635 Nw 4th Street Ft. Lauderdale, FL 33311

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

a. Date of Incorporation: 4/14/1983

b. State of Incorporation: Florida



- c. President's name: Jessie R. Foster
- d. Vice President's name: Lizeth M. Foster
- e. Secretary's name: N/A
- f. Treasurer's name: N/A
- g. Name and address of Resident Agent: \_\_\_\_\_  
\_\_\_\_\_  
Tripp Scott Attorneys at Law  
\_\_\_\_\_  
110 SE Sixth Street, Suite 1500, Fort Lauderdale, FL 33301

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? 34

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.

Broward County Competency License

15-PU-19300-X

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

N/A

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).

|            |   |                |
|------------|---|----------------|
| Anzco Inc. | 9671 Carousel Circle South Boca Raton, FL 33434 | (561)488-0822  |
| (name)     | (address)                                       | (phone number) |

|                      |   |                |
|----------------------|---|----------------|
| Cardinal Contractors | 10405 Technology Terrace Lakewood Ranch, FL 34211 | (941)377-8555  |
| (name)               | (address)   | (phone number) |

|                    |  |                |
|--------------------|--|----------------|
| John J. Kirlin LLC | 3125 W. Commercial Blvd. Ste. 200 Ft. Lauderdale, FL 33309 | (954)275-1423  |
| (name)             | (address)  | (phone number) |

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

|               |               |
|---------------|---------------|
| Thomas Edward | Raymond Evans |
|---------------|---------------|

Boswell Channer

Cheldon Williams

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

---

Carlos Rocha

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: \_\_\_\_\_

*Jessie Foster*

State of Florida County of Broward

On this the 26<sup>th</sup> day of Sept, 2017, before me, the undersigned Notary Public of the State of Florida, personally appeared

Jessie Foster 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:

*Nichola Simpson*  
NOTARY PUBLIC - STATE OF FLORIDA  
NICHOLA SIMPSON  
Notary Public - State of Florida  
Commission # GG 114150  
My Comm. Expires Jun 12, 2021  
(Name of Notary Public, Print)  
Stamp or Type as Commissioned.)

☐ Personally known to me, or

☒ Produced identification:

FL DRIV. LIC

(Type of Identification Produced)

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

OPTIONAL INFORMATION:

Type of Document: \_\_\_\_\_ Number of Pages: \_\_\_\_\_ Number of Signatures Notarized: \_\_\_\_\_





NON-COLLUSIVE AFFIDAVIT FOR BID NO 2017-019

State of Florida )

County of Broward )

Jessie R. Foster being first duly sworn, deposes  
and says that:

He/she is the Owner, (Owner, Partner, Officer,  
Representative or Agent) of Southland Painting Corp., 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 [Signature]

Witness [Signature]

By Jessie Foster

Jessie R. Foster

Printed Name

President

Title

ACKNOWLEDGMENT  
NON-COLLUSIVE AFFIDAVIT FOR BID NO 2017-019

State of Florida

County of Broward

On this the 26<sup>th</sup> day of Sept, 20 17, before me, the undersigned Notary Public of the State of Florida, personally appeared

Jessie Foster

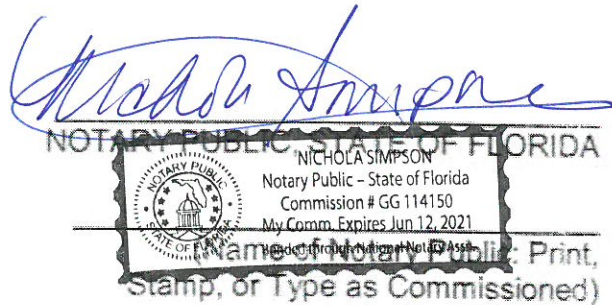
and

(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:



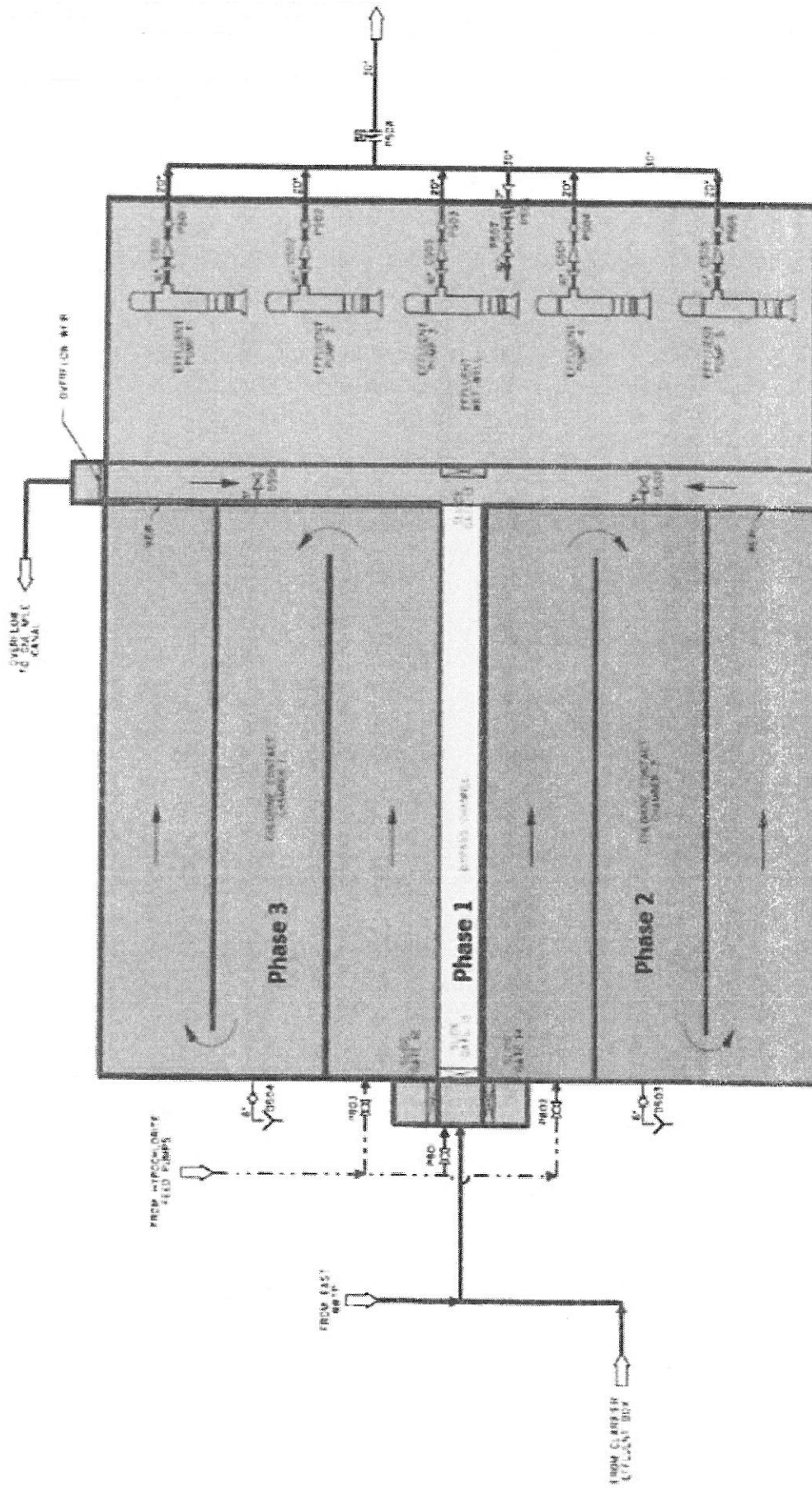
☐ Personally known to me, or  
☐ Produced identification:

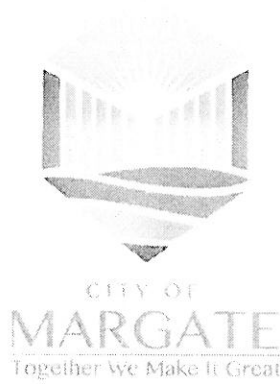
FL Div. Llc.

(Type of Identification Produced)

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

# ATTACHMENT B – ENLARGED PHASING SCHEDULE DIAGRAM





## **ADDENDUM NO. 1**

### **Bid No. 2017-019 Wastewater Treatment Plant Chlorine Contact Chamber Rehabilitation**

September 6, 2017

#### **TO ALL BIDDERS:**

Please incorporate the following information/clarifications into the specification packet for the above referenced project:

1. The bid submission date and time is extended. The new bid submission date and time deadline is September 19, 2017 at 11:00 A.M. There are no additional changes at this time. An additional addendum will be forthcoming with questions and answers from the mandatory pre-bid meeting.

Wylene Sprouse  
Purchasing Supervisor  
09/06/17

Please sign and return the acknowledgment page of this addendum by email or by fax. The original acknowledgement page is to be included with your bid package.



# ACKNOWLEDGEMENT FORM

## ADDENDUM NO. 1

### Bid No. 2017-019 Wastewater Treatment Plant Chlorine Contact Chamber Rehabilitation

I acknowledge receipt of Addendum No. 1 for Bid No. 2017-019 Wastewater Treatment Plant Chlorine Contact Chamber. This addendum contains two (2) pages. Please include the original of this form in your bid submission.

Company Name: Southland Painting Corp.


Address: 2635 NW 4th Street Ft. Lauderdale, FL 33311

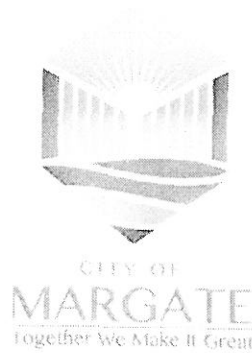
Name of Signer Jessie R. Foster  
(please print)

Signature:  Date: 9/22/2017

Telephone: (954)748-2770 Facsimile: (954)748-2901

Please fax your completed form to (954) 935-5258 or e-mail to [purchase@margatefl.com](mailto:purchase@margatefl.com).

  
Wylene Sprouse  
Purchasing Supervisor  
09/06/2017



## **ADDENDUM NO. 2**

### **Bid No. 2017-019 WWTP Chlorine Contact Chamber Rehabilitation**

September 14, 2017

#### **TO ALL BIDDERS:**

Please incorporate the following information/clarifications into the specification packet for the above referenced project:

**The bid submission date and time deadline has been extended to September 27, 2017 at 11:00 A.M.**

1. **Question:** What is the chamber going to look like when we get it? Will it be pressure cleaned?.

**Response:** As per the Surface Preparation on page 36 item 2, all sludge will be removed by the City of Margate WWTP staff. The tank will be decontaminated but will not be pressure cleaned by City staff.

2. **Question:** Will the grating above the channel be removed by the City?

**Response:** No, the contractor is responsible for removing and replacing the grating.

3. **Question:** Will the City calibrate the levels of the weirs and gages?

**Response:** No, it is the responsibility of the contractor to take existing elevations of weirs and staff gauges and verify their elevations after installation per Special Considerations page 36 number 2.

4. **Question:** Does this project require full containment?


**Response:** Yes, full containment is required.

5. **Question:** Where can we prepare and store the material?

**Response:** Due to the Waste Water Treatment Plant being classified as a Wellfield, all materials shall be mixed/ prepared inside the contact chamber and cannot come into contact with the surrounding ground area. Storage area for materials will be determined by the City and will comply with the Environmental Considerations section of the Special Conditions.

6. **DELETE:** Page 5  
**INSERT:** Page 5A
7. **DELETE:** Page 29  
**INSERT:** Page 29A
8. **DELETE:** Page 31  
**INSERT:** Page 31A
9. **DELETE:** Page 32  
**INSERT:** Page 32A
10. **DELETE:** Page 33  
**INSERT:** Page 33A
11. **DELETE:** Page 34  
**INSERT:** Page 34A
12. **DELETE:** Page 37  
**INSERT:** Page 37A
13. **DELETE:** Page 46  
**INSERT:** Page 46A
14. **DELETE:** Attachment B  
**INSERT:** Attachment B Addendum Copy

There are no additional changes at this time.

  
Wylene Sprouse  
Purchasing Supervisor  
09/14/17

Please sign and return the acknowledgment page of this addendum by email or by fax.  
The original acknowledgement page is to be included with your bid package.

# ACKNOWLEDGEMENT FORM

## ADDENDUM NO. 2

### Bid No. 2017-019 WWTP Chlorine Contact Chamber Rehabilitation

I acknowledge receipt of Addendum No. 2 for Bid No. 2017-019 WWTP Chlorine Contact Chamber Rehabilitation. This addendum contains twelve (12) pages. Please include the original of this form in your bid submission.

Company Name: Southland Painting Corp.


Address: 2635 Nw 4th Street Ft. Lauderdale, FL 33311

Name of Signer Jessie R. Foster  
(please print)

Signature:  Date: 9/22/2017

Telephone: (954)748-2770 Facsimile: (954)748-2901

Please fax your completed form to (954) 935-5258 or e-mail to [purchase@margatefl.com](mailto:purchase@margatefl.com).

  
Wylene Sprouse  
Purchasing Supervisor  
09/14/2017

## NOTICE INVITING BIDS

**SUBMITTING PROPOSALS:** Sealed bids will be received in the Purchasing Division Office, Finance Department, 5790 Margate Boulevard, Margate, FL 33063 until 11:00 A.M., Wednesday, September 27, 2017, for a completed project to provide all materials, labor, equipment, tools, transportation and permits for the Wastewater Treatment Plant Chlorine Contact Chamber Rehabilitation Project for the Department of Environmental and Engineering Services (DEES).

All bidders are required to have a representative in attendance at a **MANDATORY** site visit that will commence at 2:00 P.M. on Wednesday, August 30, 2017 from the DEES Administration Building, large conference room, located at 901 NW 66<sup>th</sup> Avenue, Suite A, Margate, FL 33063.

All bids received will be publicly opened and read at the close of bidding in the Commission Chambers of City Hall. All bidders or their representatives are invited to be present.

It will be the sole responsibility of the bidders to deliver their proposal to the Purchasing Division on or before the date and time specified. Bids received after the specified date and time will not be considered, and will be returned unopened to the bidder.

**NO FAXED OR ELECTRONICALLY TRANSMITTED BIDS WILL BE ACCEPTED.** Bids must be submitted in a sealed envelope and plainly marked on the outside of the envelope; the bidder's name and address followed by " **SEALED BID FOR** **"WASTEWATER TREATMENT PLANT CHLORINE CONTACT CHAMBER REHABILITATION BID # 2017-019"** address where bid is to be delivered or mailed to, and the date and time of the bid opening.

Bids must be submitted on the Bid Proposal Form(s) provided herein. Failure to do so will be cause for bid to be rejected. Proposals having an erasure or correction must be initialed by the bidder in ink. Bids shall be signed in ink; all quotations shall be typewritten and filled in with pen and ink.

**COMPLETION OF WORK:** The Work shall be completed within 90 calendar days after the commencement date stated in the Notice to Proceed or Purchase Order.

The Bidder shall guarantee the total bid price for a period of 90 days from the date of bid opening.



## **GENERAL**

The chlorine contact basins disinfect the treated wastewater before disposal through deep well injection. There are two contact basins, each measuring 65-feet long by 32-feet wide. A 4-foot wide channel with slide gate allows flow to bypass the chambers if necessary. The basin chambers are divided into three 10-foot wide channels by baffle walls to create a plug flow serpentine flow pattern.

The work shall consist of furnishing all supervision, labor, tools, materials, equipment, scaffolding or other structures, and supervision required for the transportation, unloading, storage, and application of the paint and associated products required to complete the rehabilitation of both chambers and bypass channel per the specifications. All work shall be completed within 90 calendar days of notice to proceed. Changes and/or modifications must have prior approval from the City. The contractor is responsible for any damages caused to government property and/ or facilities.

## **LOCATION**

All work on this project is to be performed at the City of Margate Wastewater Treatment Plant located at 6630 NW 9<sup>th</sup> St. Margate, FL 33306.

## **PERMITTING**

This project is considered a maintenance project; therefore, a no fee engineering department permit is required.

## **DESCRIPTION OF WORK**

The following outline of the principle features of work does not in any way limit the responsibility of the contractor to perform all work and furnish all materials to do a complete job within the intent and scope of the specifications and contract. The contractor shall be responsible for field-verifying existing site conditions and measurements prior to bidding. The contractor shall provide all materials and labor to complete the job as intended. All work must be in accordance with all applicable codes and standards. All OSHA standards must be adhered to. The contractor shall perform the following rehabilitation to the Chlorine Contact Chamber:



## **MATERIALS**

1. All materials specified herein are manufactured by the TNEMEC Company, Inc. These products are specified to establish standards of quality and are approved for use on this project.
2. Equivalent materials of other manufacturers may be substituted on approval of the City. Requests for substitution shall include Manufacturer's literature for each product giving the name, generic type, descriptive information and evidence of satisfactory past performance and an independent laboratory certification that their product meets the performance criteria of the specified materials.

Abrasion – Fed. Test Method Std. No. 141, Method 6192, CS-17 Wheel,  
1,000 grams load Adhesion – Elcometer Adhesion Tester Exterior Exposure  
– Exposed at 45 degrees facing the ocean (South Florida Marine Exposure)

Compressive Strength – ASTM C579

Hardness – ASTM D3363-74

Humidity – ASTM D2247-68

Salt Spray (Fog) – ASTM B117-73

3. Bidders desiring to use coatings other than those specified shall submit an alternate to their proposal. Substitutions which decrease the film thickness, the number of coats applied, change the generic type of coating, or fail to meet the performance criteria of the specified materials will not be approved. Prime and finish coats of all surfaces shall be furnished by the same manufacturer.
4. All coatings to be shop applied must meet the requirements for volatile organic compounds (VOC) of not more than 3.5 lbs/Gallon after thinning.
5. Colors, where not specified, shall be as selected by the Owner or their Representative.
6. All coatings in contact with potable water need to be NSF Certified in accordance with ANSI/NSF Standard 61.

## **COATING SYSTEM SCHEDULE**

### **1. CONCRETE**

Interior of Chlorine Contact Chambers (including wall caps)

Cementitious Epoxy Resurfacer w/ 82% Solids Cycloaliphatic Amine Epoxy





Surface Preparation: Pressure wash (3,500 psi) w/ TSP to remove all mold, mildew, dirt, dust, and other loose foreign contaminants. Abrasive Blast Clean in accordance with the Preparation of Concrete (SSPC-SP13 / NACE No.6) to meet a minimum ICRI-CSP6 on the walls and interior wall caps. The floor must receive a minimum ICRI-CSP3-5.

**DFT-Mils**

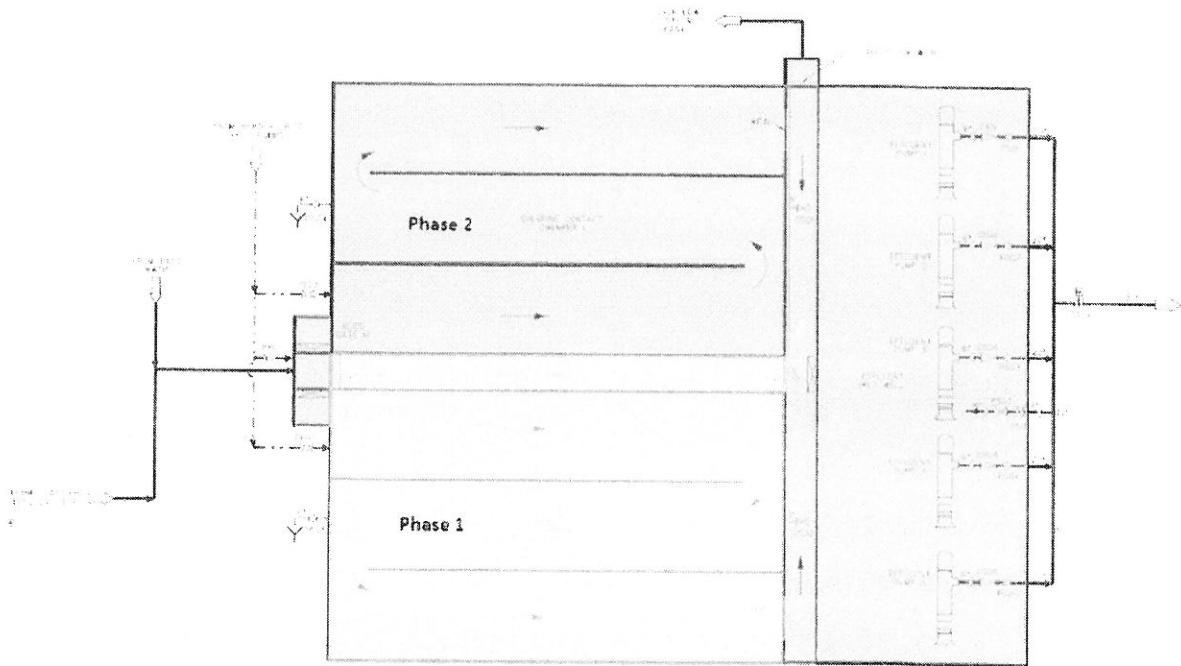
|  |                              |
|--|------------------------------|
| <u>Resurfacer:</u> 217 MortarCrete   | 1/4"+                        |
| Reblast all applied Series 217 MortarCrete in accordance with the Preparation of Concrete (SSPC-SP13 / NACE No.6) to meet a minimum ICRI-CSP3 and following strict Manufacture Guidelines. |                              |
| <u>Prime Coat:</u> 104-31GR (Slate Gray) HS Epoxy  | 6.0 – 8.0                    |
| <u>Finish Coat:</u> 104-39BL (Delft Blue) HS Epoxy   | <u>6.0 – 8.0</u>             |
|  | 14.0-18.0 + Surfacer         |
|  | Minimum 14.0 Mils + Surfacer |

NOTES: Any remaining voids after the prime coat should be filled as required with TNEMEC Series 215 Surfacing Epoxy. In addition, Tnemec Series 290-39BL (Delft Blue) CRU shall be applied @ a rate of 2.0 – 3.0 mils DFT, on the wall caps and 3 feet down all walls. Allow coatings to cure for a minimum 7 days prior to immersion.

**PHASING**

1. All work must be performed between the hours of 7:00 A.M. to 6:00 P.M. Monday thru Friday. This project shall be performed per the following phasing schedule (see diagram below):
  - Phase 1 – Bypass Channel and South Chlorine Contact Chamber
  - Phase 2 – North Chlorine Contact ChamberPhase 1 shall be completed and put back into service prior to beginning Phase 2.
2. All areas shaded in red shall not be disturbed.
3. While performing work in a specific phase, the other segments of the chlorine contact chamber will be in operation.
4. In the event that there is an excessive rain event, there may be a delay between phases due to the excess flow that will be brought into the system; the next phase of construction will begin after the system has balanced itself.





(See Attachment B for an enlarged Phasing Schedule Diagram)

### PREPARATION OF MATERIALS

Mechanical mixers, capable of thoroughly mixing the pigment and vehicle together, shall mix the paint prior to use where required by manufacturer's instructions; thorough hand mixing will be allowed for small amounts up to one gallon. Pressure pots shall be equipped with mechanical mixers to keep the pigment in suspension, when required by manufacturer's instructions. Otherwise, intermittent hand mixing shall be done to assure that no separation occurs. All mixing shall be done in accordance with SSPC Vol. 1, Chapter 4, "Practical Aspects, Use and Application of Paints" and/or with manufacturer's recommendations.

Catalysts or thinners shall be as recommended by the manufacturer and shall be added or discarded strictly in accordance with the manufacturer's instruction.



## APPLICATION

Paint shall be applied only on thoroughly dry surfaces and during periods of favorable weather, unless otherwise allowed by the paint manufacturer. Except as provided below, painting shall not be permitted when the atmospheric temperature is below 50° F, or when freshly painted surfaces may be damaged by rain, fog, dust, or condensation, and/or when it can be anticipated that these conditions will prevail during the drying period.

1. No coatings should be applied unless surface temperature is a minimum of 5° above of the dew point; temperature must be maintained during curing.
2. No coatings shall be applied unless the relative humidity is below 85%.
3. Suitable enclosures to permit painting during inclement weather may be used if provisions are made to control atmospheric conditions artificially inside the enclosure, within limits suitable for painting throughout the painting operations.
4. Field Painting in the immediate vicinity of, or on, energized electrical and rotating equipment, and equipment and/or pipes in service shall not be performed without the approval of the City.
5. Extreme care shall be exercised in the painting of all operable equipment, such as valves, electric motors, etc., so that the proper functioning of the equipment will not be affected.
6. The Contractor's scaffolding shall be erected, maintained, and dismantled without damage to structures, machinery, equipment or pipe. Drop cloths shall be used where required to protect buildings and equipment. All surfaces required to be clear for visual observations shall be cleaned immediately after paint application.
- ~~7. The prime coat shall be applied immediately following surface preparation and in no case later than the same working day. All paint shall be applied by brushing, paint mitt and roller, conventional spraying, or airless spraying, using equipment approved by the paint manufacturer.~~
8. Each coat of paint shall be recoated as per manufacturer's instructions. Paint shall be considered recoatable when an additional coat can be applied without any detrimental film irregularities such as lifting or loss of adhesion.
9. Finish colors shall be factory mixed (i.e., there shall be no tinting by the Contractor, unless authorized by the City).
- ~~10. All edges and weld seams in immersion service shall receive a "stripe coat" (applied by brush) prior to application of the full 1st coat.~~



Refer to attached product application bulletin for detailed surface preparation information.

4. All blast materials shall be fully contained.
5. Surface preparations must be in accordance with coating manufacturer's specifications.
6. Remove all contaminants in accordance with SSPC-SP13 on all concrete surfaces to be painted. Remove ~~all poorly adhered~~ existing coatings and prepare surfaces to meet an ICRI CSP6 Condition.
7. Algaecide shall be used to remove all biological growth prior to initial coating application.
8. Make necessary concrete repairs (rock pockets) to provide a smooth, even finish.
9. The surface shall be cleaned as specified for the paint system being used. All cleaning shall be as outlined in the Society of Protective Coatings' Surface Preparation Specification, unless otherwise noted. If surfaces are subject to contamination, other than mill scale or normal atmospheric rusting, the surfaces shall be pressure washed, and acid or caustic pH residues neutralized, in addition to the specified surface preparation.
10. Recommendations shall be followed. Any questions relative to compatibility of products shall be brought to the City's attention; otherwise, Contractor assumes full responsibility.

#### **INSPECTION OF SURFACES**

1. Before application of the prime coat and each succeeding coat, all surfaces to be coated shall be subject to inspection by the City and paint manufacturer's representative. Any defects or deficiencies shall be corrected by the Contractor before application of any subsequent coating.
2. Samples of surface preparation and of painting systems shall be furnished by the Contractor to be used as a standard throughout the job, unless omitted by the City.
3. When any appreciable time has elapsed between coatings, previously coated areas shall be carefully inspected by the City, and where, in his opinion, surfaces are damaged or contaminated, they shall be cleaned and recoated at the Contractor's expense. Recoating times of manufacturer's printed instructions shall be adhered to.
4. Coating thickness shall be determined by the use of a properly calibrated "Nordson-Mikrotest" "Positest" Coating Thickness Gauge (or equal) for ferrous metal or an OG232 "Tooke" Paint Inspection gauge (or equal) for non-ferrous and cementitious surfaces. Please note that use of the "tooke" gauge is classified as a destructive test.
5. A final inspection shall be performed by City and paint manufacturer's representative to obtain project certification.

# SCHEDULE OF BID PRICES – BID NO. 2017-019

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:

| *****  |             |  |   |
|--|-------------|--|---|
| Description  | Unit        | Cost with specified<br>Tnemec products | Cost with City<br>approved equivalent<br>products |
| Total cost to furnish labor, licenses, material, equipment, tools, permits and insurance necessary to complete the Wastewater Treatment Plant Chlorine Contact Chamber Rehabilitation project. | Lump<br>Sum |  |   |

NOTE: Bidders shall submit pricing for one or both options shown above

TOTAL FOR ALL ITEMS

\_\_\_\_\_

10% CONTINGENCY\*

(\*REPRESENTS POSSIBLE COSTS FOR UNFORSEEN WORK, IF APPROVED BY CITY)

\_\_\_\_\_

GRAND TOTAL FOR ALL ITEMS

\_\_\_\_\_

\*\*\*\*\*

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.

MATERIAL SAFETY DATA SHEETS ENCLOSED? YES \_\_\_\_\_ NO \_\_\_\_\_

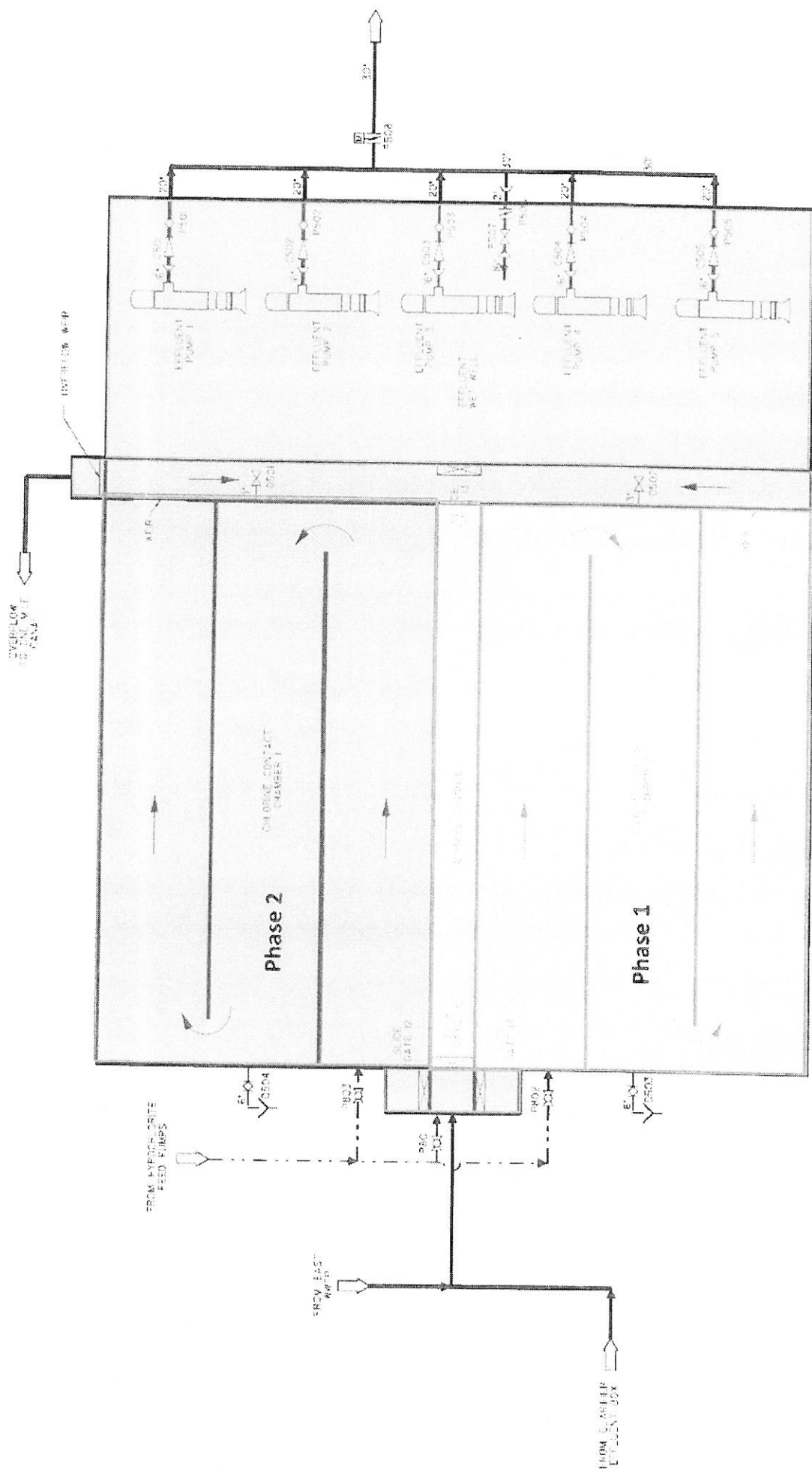
SPECIFICATION SHEETS/BROCHURES? YES \_\_\_\_\_ NO \_\_\_\_\_

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 \_\_\_\_\_

# ATTACHMENT B – ENLARGED PHASING SCHEDULE DIAGRAM





Industrial Painting – Sandblasting– Waterproofing  
Cementitious Coatings– Farrow Sandblasting System– Crack Injection  
Floor Coating– Plural Component– 40K P.S.I. UHP



May 25, 2017

City of Margate  
Purchasing Division Office,  
Finance Department

Ref: Waste Water Treatment Plant Chlorine Contact Chamber Rehabilitation

Subject: Introduction Letter  
Southland Painting Corp.  
Field Personnel – Bid Item requirement # 14

I would like to take this opportunity to introduce our Company, **Southland Painting Corp.**

Southland Painting Corp was founded in 1983 and is an **SSPC QP1 & QP2 Certified Contractor**, with extensive experience in the field of Water and Wastewater Coating projects, waterproofing, Cementitious coatings, ultra high pressure cleaning, sandblasting, crack injection, plural component, floor coatings, Eco/Farrow sandblasting systems and concrete repair work.

*We are proficient in the application of plural component epoxies with heated plural component equipment applied inside steel tanks and concrete containments.*

Our jobs have involved projects such as special coatings, painting of piping, sandblasting, including dust containments and tarping, installation and use of dehumidification systems, seamless flooring, concrete repair and steel repair maintenance.

Our Past President/Owner has 48 years of experience in this field since 1967, in Europe and United States and he oversees all operations. Our Present President/Owner, Mr. Jessie R. Foster, has over 30 years' experience in this industry. Our personnel (mentioned below) have been with our company for at least 5 years.

Southland Painting Corp has completed several elaborate projects, such as bridge projects, painting and rehabilitation of water, wastewater, and power plants, pump stations and lift stations, as a sub with different General Contractors, or direct with Agencies throughout the state of Florida, Georgia and the Caribbean. These involved sandblasting and special coatings, seamless flooring, concrete repair and maintenance. Some of these projects entail elaborate engineering set ups.

Southland Painting Corp has an outstanding office staff trained in various programs from SSPC, such as Concrete Coatings Inspectors, Lead Paint C-5, Coatings Application Specialists, Project Management, etc. They handle different aspects of the business from technical industrial field aspects, **(NACE Level III Certified on Staff)** to business oriented paperwork.



Industrial Painting – Sandblasting– Waterproofing  
Cementitious Coatings– Farrow Sandblasting System– Crack Injection  
Floor Coating– Plural Component– 40K P.S.I. UHP



BM

Southland Painting Corp is a Drug Free Workplace and all employees are drug pre-screened before employment and randomly. They are medically monitored yearly, trained and certified in the following areas of job safety:

Carlos Rocha, PM QCS (Quality Control Supervisor)  
Thomas Edward (25 yrs)  
Lazarus Joseph (17 yrs)  
Raymond Evans (15 years)  
Cheldon Williams (17 yrs)  
Wilson Vargas (7 yrs)  
Walter Vargas (7 yrs)  
Rayko Gomez (5 yrs)  
Fenton Garcia (7 yrs)

|                               |                                |
|-------------------------------|--------------------------------|
| 40 Hr. OSHA                   | Respiratory Protection Program |
| FIT Testing                   | Confined Space Entry           |
| HAZWOPER                      | Hazardous Communication        |
| Personal Protective Equipment | High Lifts Operation           |
| Boom Lifts Operation          |                                |

Southland Painting Corp is very reputable and provides incentives to its entire staff that motivates them to deliver the utmost quality of work, accident free (**EMR Mod is 0.94**), whether in the field, or in the office. Southland Painting Corp is committed to complete every project in a timely manner, and to this day has lived up to this commitment.





Industrial Painting – Sandblasting– Waterproofing  
Cementitious Coatings– Farrow Sandblasting System– Crack Injection  
Floor Coating– Plural Component– 40K P.S.I. UHP



Southland Painting Corp transmits to its employees a sense of pride and responsibility, which is evident in all of our projects.

We feel that we are very well qualified for all upcoming protective coating projects at existing and new water and wastewater facilities.

Sincerely Yours,  
Jessie R. Foster,

President

***NACE Certified Coatings Inspector Level III # 37106***  
***Certified Concrete Inspector # 44713***  
Southland Painting Corp  
***Certified SSPC - QP 1 Contractor/Certified SSPC - QP 2 Contractor***  
[www.southlandpaintingcorp.com](http://www.southlandpaintingcorp.com)  
**954-854-3138 cell/954-748-2770 office/954-748-2901 fax**  
Intro letter wf Construction .doc



Carlos M. Rocha Jr.  
5510 Pacific Boulevard, # 108  
Boca Raton, FL 33433  
954/326-3055  
Carlos@southlandpainting.com

---

#### CERTIFICATION

Osha 30hrs  
RRP Lead Certified  
C3 – SSPC Safety Supervisor  
C5 – SSPC Lead Paint Removal Refresher  
Quality Control Supervisor/PCI Level 1

#### OVERVIEW/SKILLS

A highly motivated project manager with a verifiable record of accomplishment spanning 12 years. Highly creative, recognized as a results-oriented and solution-focused individual. Areas of strength include:

- Necessary on site administration along with proper quality control measures for ensuring the entire project finish on time and as budgeted.
- Provide necessary coordination and planning for the contractors along with the subcontractors.
- Organize cost control with required payroll management.
- Responsible for subcontract negotiations and purchase orders as well as usual contracts with customers.
- Organizational Skills
- Determine labor requirements and dispatch workers to construction sites.
- Interpret and explain plans and contract terms to administrative staff, workers, and clients; representing the owner or developer.
- Obtain all necessary permits and licenses.
- Computer Literacy
- Communication Skills
- Time Management Skills
- Staff Supervision
- Ability to perform mathematical computations such as percentages, fractions, addition, subtraction, multiplication and division quickly and accurately.
- Ability to work independently and with a team in a fast-paced and high volume environment with emphasis on accuracy and timeliness.
- Trilingual- English, Portuguese, Spanish

#### COMPUTER SKILLS

- Microsoft Word
- Microsoft Excel
- Word Perfect

#### EDUCATION

09/94 – 06/98

North Bergen High School, North Bergen, NJ

**EMPLOYMENT****02/01 – 09/02****Rocha Construction, Union City, NJ***Construction Manager*

- Coordinated the Construction Process
- Responsible for hiring carpenters, general laborers and electricians to work a construction project.
- Dealing with emergency situations as they arise.
- Inspected and reviewed projects to monitor compliance with building and safety codes, and other regulations.
- Directed and supervised workers
- Attended and Conducted Tool Box Meetings
- Attended and Conducted weekly safety meetings
- Responsible for on field safety and quality compliance on various restoration projects
- Oversight of Contractors on site safety engineer

**09/02 – 09/04****Pino & Son Supply, Union City, NJ***Store Manager*

- Managed time, multi-task, problem solve.
- Management of Accounts Receivable; Management of customer accounts including sales and customer services; Inventory Management including Purchasing and Receiving.
- Design and set up advertising signs and displays of merchandise on shelves, counters, or table to attract customers and promote sales.
- Take inventory or examine merchandise to identify items to be reordered or replenished.
- Answer customers' questions about merchandise and advise customers on merchandise selection.
- Maintenance of the books of daily transactions done by the company.
- File materials in alphabetical, numerical, or subject order.

**06/04 – 02/13****Quality Pro Painters***Project Manager/Painter*

- Knowledge of the tools, equipment, materials, and application techniques common to the painting trade.
- Skill in the preparation and application of paints, stains, and surface preparation materials to a wide variety of surfaces.
- Knowledge and skill in hazardous materials handling, application, and disposal.
- Created and executed project work plans and revised as appropriate to meet changing needs and requirements.
- Managed day-to-day operational aspects of a project and scope.
- Managed project budget.
- Developed effective plans, creating project schedules that took into account all stages of the plan and established deadlines.
- Attended and Conducted Tool Box Meetings
- Attended and Conducted weekly safety meetings
- Responsible for on field safety and quality compliance on various restoration projects
- Oversight of Contractors on site safety engineer

**06/13 – 10/13**

**Innovative Carpentry**

*Project Manager/Carpenter*

- Necessary on site administration along with proper quality control measures for ensuring the entire project finish on time and on budget.
- Responsible for on field safety and quality compliance on various restoration projects
- Skill in the preparation and application of paints, stains, and surface preparation materials to a wide variety of surfaces
- Installation of kitchen cabinets
- Developed effective plans, creating project schedules that took into account all stages of the plan and established deadlines.

**10/13 – Present**

**Southland Painting Corp.**

*Regional Manager/Quality Control Supervisor*

- Knowledge of the tools, equipment, materials, and application techniques common to the painting trade.
- Knowledge and skill in hazardous materials handling, application, and disposal.
- Created and executed project work plans are revise as appropriate to meet changing needs and requirements.
- Manage day-to-day operational aspects of a project and scope.
- Manage project budget.
- Develop effective plans, creating project schedules that take into account of stages of the plan and establish deadlines.
- Attend and Conduct Tool Box Meetings.
- Attend and Conduct weekly safety meetings.
- Responsible for on field safety and quality compliance on various projects.
- Oversight of Contractors on site safety engineer.



# CERTIFICATE OF LIABILITY INSURANCE

SOUTH10

OP ID: TA

DATE (MM/DD/YYYY)

06/06/2017

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).

|  |  |              |  |   |  |
|--|--|--------------|--|---|--|
| <b>PRODUCER</b><br>INNOVATIVE INSURANCE<br>CONSULTANTS, INC.<br>5461 UNIVERSITY DRIVE, #103<br>CORAL SPRINGS, FL 33067<br>DAVID LEE SCHWARTZ |  | 954-340-9551 |  | <b>CONTACT NAME:</b> DAVID LEE SCHWARTZ<br><b>PHONE (A/C, No, Ext):</b> 954-340-9551<br><b>FAX (A/C, No):</b> 954-340-9456<br><b>E-MAIL ADDRESS:</b> DAVE@INNOVATIVE-INSURANCE.COM  |  |
| <b>INSURED</b><br>SOUTHLAND PAINTING CORP.<br>2635 NW 4TH STREET<br>FT. LAUDERDALE, FL 33311   |  |              |  | <b>INSURER(S) AFFORDING COVERAGE</b><br><b>INSURER A:</b> OHIO SECURITY INS CO<br><b>INSURER B:</b> OHIO CASUALTY INS. CO.<br><b>INSURER C:</b> FCCI INSURANCE CO.<br><b>INSURER D:</b> AGCS MARINE INSURANCE CO.<br><b>INSURER E:</b><br><b>INSURER F:</b> |  |
|  |  |              |  | <b>NAIC #</b><br>24082<br>33472<br>22837  |  |

## COVERAGES

## CERTIFICATE NUMBER:

## REVISION NUMBER:

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

| INSR LTR | TYPE OF INSURANCE   | ADDL INSD | SUBR WVD | POLICY NUMBER                               | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS   |
|----------|---|-----------|----------|---|-------------------------|-------------------------|--|
| A        | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br><input checked="" type="checkbox"/> BLANKET ADDL INSD<br><input checked="" type="checkbox"/> BLANKET WAIVER<br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC<br>OTHER: | X         | X        | BLS(18)56601555<br>PRIMARY/NON-CONTRIBUTORY | 06/15/2017              | 06/15/2018              | EACH OCCURRENCE \$ 1,000,000<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000<br>MED EXP (Any one person) \$ 15,000<br>PERSONAL & ADV INJURY \$ 1,000,000<br>GENERAL AGGREGATE \$ 2,000,000<br>PRODUCTS - COM/PO/AGG \$ 2,000,000 |
|          | <b>AUTOMOBILE LIABILITY</b><br><input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS<br><input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY  |           |          | BAS(18)56601555                             | 06/15/2017              | 06/15/2018              | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$  |
| B        | <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR<br><input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE<br>DED <input checked="" type="checkbox"/> RETENTION \$ 10,000   |           |          | USO(18)56601555                             | 06/15/2017              | 06/15/2018              | EACH OCCURRENCE \$ 4,000,000<br>AGGREGATE \$ 4,000,000   |
| C        | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/><br>If yes, describe under DESCRIPTION OF OPERATIONS below  | Y/N       | X        | 32734<br>BLANKET WAIVER                     | 01/01/2017              | 01/01/2018              | <input checked="" type="checkbox"/> PER STATUTE <input checked="" type="checkbox"/> OTHER<br>E.L. EACH ACCIDENT \$ 1,000,000<br>E.L. DISEASE - EA EMPLOYEE \$ 1,000,000<br>E.L. DISEASE - POLICY LIMIT \$ 1,000,000                      |
| D        | <b>PROPERTY</b>   |           |          | SML93067588                                 | 06/15/2017              | 06/15/2018              |  |
| D        | <b>EQUIPMENT</b>  |           |          | SML93067588                                 | 06/15/2017              | 06/15/2018              |  |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
CERTIFICATE HOLDER IS ALSO KNOWN AS ADDITIONAL INSURED WITH RESPECT TO GENERAL LIABILITY FOR ONGOING AND COMPLETED OPERATIONS (PLEASE PROVIDE CG2010 11/85 OR ITS EQUIVALENT) COVERAGE IS PRIMARY AND NON-CONTRIBUTORY TO ANY OTHER INSURANCE. A WAIVER OF SUBROGATION APPLIES IN FAVOR OF THE CERTIFICATE HOLDER WITH RESPECT TO GENERAL LIABILITY & WORKERS COMPENSATION

## CERTIFICATE HOLDER

SOUTHL3

SOUTHLAND PAINTING CORP.  
\*\*\*\*\*SAMPLE CERTIFICATE\*\*\*\*\*  
\*\*\*\*\*SAMPLE CERTIFICATE\*\*\*\*\*  
2635 NW 4TH STREET  
FT LAUDERDALE, FL 33311

## CANCELLATION

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



**PAINTING UNLIMITED**

15-PU-19300-X  
FOSTER, JESSIE R. - QUALIFYING  
SOUTHLAND PAINTING CORP  
2635 NW 4 ST  
FORT LAUDERDALE FL 33311  
EXPIRES 08/31/2018



**CERTIFICATE OF COMPETENCY**

Detach and **SIGN** the reverse side of this card **IMMEDIATELY** upon receipt! You should carry this card with you at all times.

Contractor must obtain a photo I.D. Certificate of Competency Card every two years.

FOSTER, JESSIE R.  
5290 NW 74 TERR  
LAUDERHILL FL 33311

**BROWARD COUNTY, FLORIDA  
CERTIFICATE OF COMPETENCY**

**CC#** PAINTING UNLIMITED  
15-PU-19300-X  
FOSTER, JESSIE R. - QUALIFYING  
SOUTHLAND PAINTING CORP  
2635 NW 4 ST  
FORT LAUDERDALE FL 33311

EXPIRES 08/31/2018